





★ STELLAR PERFORMANCE IN PSORIASIS

PHYSICIANS acclaim RIASOL'S performance in psoriasis. They quickly discern its prompt action in clearing the unsightly lesions, the low incidence of recurrence following its use and the patients' satisfaction with results.

Patients acclaim RIASOL'S performance in psoriasis. They observe that the disfiguring blemishes gradually fade and disappear. This inspires confidence in the physician and full cooperation.

Because of the outstanding advantages of RIASOL, and because physicians and patients alike acclaim its performance, many thousands of prescriptions are being written every year.

RIASOL contains 0.45% mercury chemically combined with soaps, 0.5% phenol and 0.75% cresol in a washable, non-staining, odorless vehicle.

RIASOL is applied daily after a mild soap bath and thorough drying. A thin, invisible, economical film suffices. No bandages necessary. After a week, adjust to patient's progress.

RIASOL is not advertised to the laity. Supplied in 4 and 8 fld. oz. bottles, at pharmacies or direct.

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ON REQUEST



SHIELD LABS. 8751 Grand River Ave., Detroit 4, Mich.

RIASOL FOR PSORIASIS

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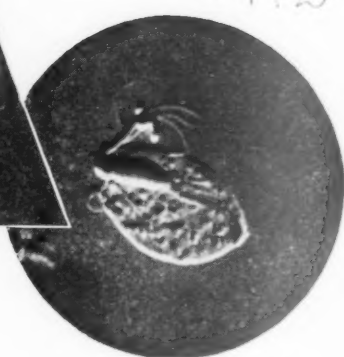
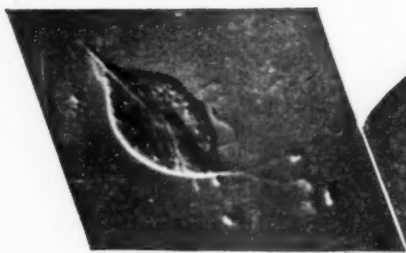
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Copyright 1946, Rutherford, N.J. Circulation now 150,000 registered nurses monthly. EDITOR: Dorothy Sutherland. ASSOCIATE: Alice R. Clarke, R.N.; ART: Marjorie Pedretti.

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RT,
R2

trichomonas vaginitis

*Rapid Relief and Less
Likelihood of Recurrence*

*R*apid eradication of the trichomonas parasite and disappearance of the disagreeable leukorrhea, burning and itching are commonly achieved with Devegan.

*I*n addition to a powerful trichomonicide, Devegan contains special carbohydrates which favor the growth of lactobacilli and restoration of the normal vaginal acidity that greatly reduces the likelihood of recurrence.



Powder for insufflation in 1 oz. bottles (thread fits Holm-spray Insufflator, No. 3662). Tablets for vaginal insertion.

Wintthrop **CHEMICAL COMPANY, INC.**
Pharmaceuticals of merit for the physician
NEW YORK 13, N. Y. WINDSOR, ON

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First Point of Leverage in Subnutritional States

Of the many dietary indiscretions which lead to subnutritional states, the all too common practice of breakfast skipping or skimping is among the most prevalent. Recent surveys indicate that a surprisingly large percentage of the population partakes of a totally inadequate breakfast in the erroneous belief that this meal is unimportant or that little harm can accrue from the practice.

That a state of good nutrition and consequently peak efficiency can hardly be maintained if the breakfast is not adequate is universally acknowledged. Hence the widely recommended basic breakfast pattern which assures a good nutritional and metabolic start for the day, and makes unnecessary overburdening the other two meals in order to satisfy the daily nutrient needs. This breakfast provides fruit, cereal with milk, bread

or toast, butter, and beverage. The inclusion of the cereal serving adds measurably to the nutrient values of this meal, providing biologically adequate protein, readily available caloric food energy, as well as B complex vitamins and essential minerals. The table of composite averages outlines the quantitative contribution made by a dish of 1 ounce of cereal (whole grain, enriched, or restored to whole grain values of thiamine, niacin, and iron), 4 ounces of milk, and 1 teaspoonful of sugar:

Calories.....	202
Protein.....	7.1 Gm.
Fat.....	5.0 Gm.
Carbohydrate.....	33 Gm.
Calcium.....	156 mg.
Phosphorus.....	206 mg.
Iron.....	1.6 mg.
Thiamine.....	0.17 mg.
Riboflavin.....	0.24 mg.
Niacin.....	1.4 mg.



The presence of this seal indicates that all nutritional statements in this advertisement have been found acceptable by the Council on Foods and Nutrition of the American Medical Association.

CEREAL INSTITUTE, INC.
135 SOUTH LA SALLE STREET • CHICAGO 3



Sul-Tarbonis

A Rational Combination, Effective in
Many Heretofore Intractable Skin Conditions

Sul-Tarbonis combines the well-established therapeutic efficacy of Tarbonis (Liquor Carbonis Detergens 5%) with the proven antibacterial actions of sulfathiazole (5%). It thus provides a rational effective means of treating impetigo contagiosa, chronic infectious eczematoid dermatitis, infected varicose and other chronic ulcers, infected tinea corporis and pedis, pyoderma, and all other types of infected cutaneous lesions. As emphasized by Kenney et al. (Kenney, E. L.; Pembroke, R. H.; Chatard, F. E., and Ziegler, J. M.: Sulfathiazole Ointment in the Treatment of Cutaneous Infections, J.A.M.A. 117:1415 [Oct. 25] 1941), this combination of sulfathiazole and liquor carbonis detergens (in ointment form) combats not only the underlying dermatologic lesion but the secondary infection as well.

THE TARBONIS COMPANY

4300 EUCLID AVENUE • CLEVELAND 3, OHIO

Tarbonis

All the Therapeutic Value of Tar in an
Odorless, Greaseless, Non-Staining,
Non-Soiling, Vanishing-Type Cream.

When secondary infection is not a complicating feature, Tarbonis remains the method of choice for the treatment of the many skin lesions known to respond to tar. It provides 5% highly active liquor carbonis detergens, together with menthol and lanolin, in a greaseless, odorless, stainless vanishing cream base. Tarbonis is specifically indicated in eczema (including the infantile and atopic varieties), psoriasis, ringworm, occupational dermatoses, folliculitis, seborrheic dermatitis, intertrigo, pityriasis, varicose ulcers, contact dermatitis, lichen planus, ulcer hypostaticum.



Nurses are invited to send for literature and sample of both products

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as 5%)
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This harvest is only half the battle!

When the crops are in and the fields lie quiet in the autumn sun, America's great campaign for food is still unfinished. There's another front where it must go forward every single day — on the dairy farm.

Here is a rich, white harvest which has to be reaped *twice* daily. It's a harvest of health and vitality, too — and the need for it knows no seasons. Milk is not only nature's most perfect food, but a hungry world wants more of it than ever before in human history.

Fortunately, there is an abundance of milk and dairy products for the American family today. Hard work by the nation's dairy farmers and growing public appreciation of milk's value have brought about a 20% increase in production since before the war.

We at National Dairy are helping our farmers achieve still greater production through more widespread application of dairy

science. Our laboratories, too, continue their constant vigilance — guarding the high standards of our products. No possible effort is spared to protect this precious harvest.

Dedicated to the wider use and better understanding of dairy products as human food . . . as a base for the development of new products and materials . . . as a source of health and enduring progress on the farms and in the towns and cities of America.



**NATIONAL DAIRY
PRODUCTS CORPORATION**
AND AFFILIATED COMPANIES

**"JUST THE THING FOR
PERSPIRATION ODORS"**



The formula for MUM, the widely-used deodorant for neutralizing perspiration odors, is based on years of research, experiment and study of perspiration.

MUM is the favorite deodorant of millions. It is used and recommended by the profession because it is easily applied, quickly effective and long-lasting.

A snow-white cream, dainty, non-irritating, harmless to fabrics—MUM gives long hours of freedom from embarrassing perspiration odors without interfering with normal sweat-gland activity.

Why not suggest MUM to your patients?

M U M

TAKES THE ODOR OUT OF STALE PERSPIRATION

A Product of BRISTOL-MYERS COMPANY
19D West 50th Street, New York 20, N.Y.



Debits and Credits

Self Help

Dear Editor :

While visiting a friend of mine I was looking through an R.N. and came across the letter about Dr. Evan Kane.

May I correct this and give you the proper information?

Dr. Evan O'Neill Kane performed an appendectomy on himself February 14, 1921, at Kane Summit Hospital, Kane, Pa. At that time I was a student nurse at the hospital.

It was on January 7, 1932 at Kane Summit Hospital that he performed a herniotomy on himself. I was then a supervisor and witnessed the entire operation.

Perhaps the girls who furnished the information, as well as Opal Kitchin who made the original inquiry, will be interested in this.

NAOMI J. JOHNSON, R.N.
KANE, PA.

Platform

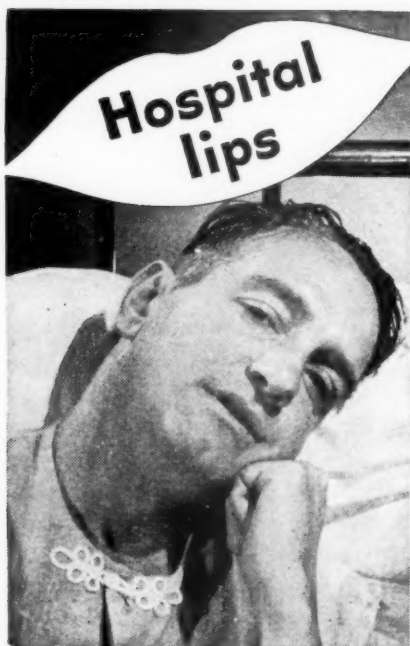
Dear Editor:

I suggest the following remedies for the shortage of institutional nurses:

1. Make institutional nursing as at-

tractive to nurses as other branches of the profession.

2. Give a decent salary commensurate with today's living expenses.
3. Give regular semi-annual increases.
4. Add about \$30 for living-out expenses.
5. Inaugurate an 8-hour day, 40 or 45-hour week. (This can be arranged by giving two consecutive long days, or a P.M. the day before the weekly long day.)
6. Allow three to four weeks vacation with pay after one full year's service.
7. Allow one month's sick leave with pay each year. Also compensation for injuries received in line of duty.
8. Allow 15-minute rest periods morning and afternoon, so that nurses can sit down and rest their feet, if they so desire.
9. Make deductions from paychecks for old age and unemployment benefits.
10. Give overtime pay if extra work or emergencies demand overtime.
11. Provide food comparable to that



A Common Condition

Your convalescent patients frequently suffer from dry, cracked, "hospital lips." **CHAP STICK**—*specially medicated—specially soothing*—gives prompt relief. Both men and women patients will appreciate your thoughtfulness when you suggest **CHAP STICK**. And, whenever your lips are chapped, may we suggest that you use **CHAP STICK** yourself!

Write for
free sample



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no Federal Tax

KEEPS LIPS FIT

CHAP STICK CO., Lynchburg, Va.

- served private patients.
12. Give regular physical checkups, including chest Xrays and laboratory tests.
 13. Provide comfortable and pleasant living quarters with attractive reception or sitting rooms.
 14. For nurses living out, provide pleasant locker rooms with mirrors, powder tables, and wastebaskets, and an adequate number of chairs to use while changing their shoes.
 15. Give two weeks' notice or two weeks' pay at time of discharge.

Z. LORNIÉ, R.N.

JERSEY CITY, N.J.

Only Human

Dear Editor:

I feel more and more as time goes by that it is necessary to make the public aware of the fact that nurses are people. Even in these modern times, the general public seems to regard the nurse as some super form of mechanism that should never run down. The public seems to be unaware of the fact that we are human, with the same longings and desires that they have, and that we too become ill and tired.

Nurses are not supposed to strike. Every other industry maintains the right to strike, regardless of the inconveniences and shortages of essential materials forced on us by striking. We want a decent living wage. We pay the same for the necessities of life as anyone else.

I am not writing this as an indictment against the public. I merely



Young Man in White

● You may call him an "interne," but in name and in fact he's every inch a doctor.

He has his textbook education... his doctor's degree. But, in return for the privilege of working side by side with the masters of his profession, he

will spend a year—more likely two—as an active member of a hospital staff.

His hours are long and arduous... his duties exacting. But when he finally hangs out his coveted shingle in private practice he will be *a doctor with experience!*



According to a recent independent nationwide survey:

**More Doctors
Smoke Camels**

than any other cigarette

R. J. Reynolds Tobacco Co., Winston-Salem, N. C.

If you're satisfied—FINE—and congratulations! If you like your location—your circle of friends pleases you—your position in nursing gives you the outlet you need for personal satisfaction and accomplishment—your salary is commensurate with the effort you give, you don't need us. BUT—if you'd like to improve these conditions, if you aren't making the progress you should, either personally or professionally, WE may have the answer. At any rate, won't you let us try? Consult us regarding West Coast opportunities.

ANAESTHETISTS—(a) Approved hospital, San Francisco area; \$275. (b) Large county hospital, San Joaquin Valley south of San Francisco; \$300. (c) Someone with army training in anaesthesia preferred; near-beach location, Southern California; \$250. (d) Large private Catholic hospital; Southern California; several anaesthetists on staff; \$250.

GENERAL DUTY—(a) Almost ALL California hospitals go on a 5½ day week October first and 5-day January first; \$200 for 8-hour duty. (b) Desert hospital; 5-day week; California winter resort; \$225, meals. (c) Modern Tuberculosis unit of Coast Hospital, \$220, 44 hour week (\$45 deduction if live in).

SURGERY NURSES—(a) Experienced operating room nurse, 5-day week, every weekend off; 45-bed general privately owned hospital, near ocean between Los Angeles and San Francisco; \$220. (b) High Sierras, Nevada; \$190, maintenance.

SUPERVISORS—(a) Teaching supervisor, operating room. Must have postgraduate course and experience in supervising department of large hospital; ample staff assistants; 5½-day week; \$270. (b) Night supervisor of house; 100-bed private general hospital, Central California; \$235, very pleasant connection. (c) Medical teaching supervisor; degree required; \$275.

SUPERINTENDENT—Small private general hospital; eastern slope of High Sierras, California; responsible for business management and nursing staff; \$250.

TECHNICIANS—(a) Well-qualified laboratory technician, take charge of department, small but busy hospital laboratory near Los Angeles; \$200, maintenance. (b) Doctor's office, Central California; \$300. (c) Well-established laboratory, Southern Arizona; \$225, house available.

Business and Medical Registry

609 South Grand Ave., Los Angeles, Calif.
(Agency) Elsie Miller, Director

want to make them aware of the fact that nurses, too, are people and crave the understanding and consideration due to any human being, regardless of his station in life.

R.N., PHILADELPHIA, PA.

Vindication

Dear Editor:

As a retired Army nurse, I find the situation facing hospitals in the Middle West, and probably all over the country, understandable, and certainly very serious. I am now working very hard and very long hours at a little over half the pay that I received while in the Army. Who can blame the nurse veterans for wanting to go on to school, or looking for better paying positions? Hospitals have nothing to offer.

How about pay increases, with extra pay for those necessary but unpleasant jobs, such as taking call, night duty, and communicable disease nursing? I realize that some places are doing that but it is certainly the exception rather than the rule.

SIGNE S. COOPER, R.N.
MADISON, WIS.

Nordic Reply

Dear Editor:

I want to thank you for Miss Olson's article "New Start for Norway." [R.N., July].

I am always glad to find news in the papers concerning Norway for I do think we need publicity. I came to this country in January of 1946

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ITS PALATABLE TASTE

is Appreciated

Palate appeal in the convalescent surgical diet is of utmost importance in encouraging adequate intake of the nutrients needed for maximum rate of tissue repair. During this period, when the appetite not infrequently lags, convalescence can be unduly prolonged and ultimate return of strength and vigor retarded if anorexia or food aversion complicates the picture.

Through the simple expedient of including the food drink made by mix-

ing Ovaltine with milk in the post-operative and convalescent dietary, the intake of all essential nutrients rises sharply. Delicious and palate tempting, it is enjoyed by all patients. Its wealth of nutrients, as indicated by the table of composition, supplies the very substances needed during recovery periods. Three glassfuls daily, contributing significant amounts of basic and auxiliary nutrients, are relished by the patient and regarded as a treat.

THE WANDER COMPANY, 360 N. MICHIGAN AVE., CHICAGO 1, ILL.



Ovaltine

Three servings daily of Ovaltine, each made of
½ oz. of Ovaltine and 8 oz. of whole milk,* provide:

CALORIES.....	669	VITAMIN A.....	3000 I.U.
PROTEIN.....	32.1 Gm.	VITAMIN B ₁	1.16 mg.
FAT.....	31.5 Gm.	RIBOFLAVIN.....	1.50 mg.
CARBOHYDRATE.....	64.8 Gm.	NIACIN.....	6.81 mg.
CALCIUM.....	1.12 Gm.	VITAMIN C.....	39.6 mg.
PHOSPHORUS.....	0.939 Gm.	VITAMIN D.....	417 I.U.
IRON.....	12.0 mg.	COPPER.....	0.50 mg.

*Based on average reported values for milk.

Does 2 things at same time!



**New
better, whiter
ENERGINE
SHOE WHITE
CLEANS as it
WHITENS**

NEW, better, whiter Engerine Shoe White—containing whitest pigment money can buy—makes dirt and smudges vanish while it whitens. Engerine Shoe White goes on in a jiffy, and there's nothing that stays on better.



with one year's leave of absence to study for a degree at the University of Rochester, N.Y. I graduated about two years ago from the Red Cross School in Bergen and have been in Norway throughout the long years of occupation.

As students, we were sent to different hospitals and since the Germans were all over and the Red Cross is neutral, most of us had to work in the German divisions. To refuse would have brought us to prison. It is unnecessary to describe what we felt. We worked with our hands but not with our hearts.

Having been through these years, I appreciated the article very much indeed.

WENCHE THRULSEN, R.N.
ROCHESTER, N.Y.

Urgent Needs

Dear Editor:

After reading various articles on the survey of the nursing profession by Mr. Edward L. Bernays (in the *American Journal of Nursing*) I should like to submit the following urgent needs and changes in nursing practices which are obvious to me and I think I speak for the many who will not speak for themselves.

1. Establish a Grievance Center in every city and town for all R.N.'s where legal, intelligent and constructive advice may be obtained.
2. Federal insurance to cover illness and provide retirement of all R.N.'s after 30 years of active professional service.

Picture yourself in fine white Poplin

Here's a chance to assemble a wardrobe of pre-war quality white poplin uniforms.

Design is flattering, yet crisp and professional-looking. The fine fabric and careful tailoring assure long wear. Fit is perfect, of course.

There's no telling how long we'll still have the superb poplin now on hand. If you like the model illustrated, please order now; or if you would prefer a wider selection, send for our new illustrated mail order folder.

Shown at right; Model No. 1001 — Open coat model with set-in-belt and French cuffs.

6.95

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(write in quantity desired)

I enclose check ☐ Money Order ☐

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NO MORE ROUGH HANDS OR DRIED OUT SKIN

LAMO (Nason's) is a mildly medicated skin cream—refined lanolin in a bland, cold-cream type base—developed especially for the skin protection and care of nurses and doctors. LAMO has none of the objectionable features of lanolin alone; it is not gummy, greasy, stringy or unpleasant smelling. It has consistent body, does not dry out or become rancid, and is delicately perfumed. LAMO (Nason's) supplies beneficial fatty materials lacking in dry skin, or which may have been removed from normal skin by the continued use of strong detergents, as in pre-operative scrubbing of hands and arms, and gives lasting protection to the skin.

Ethically distributed in 1-oz. and 4-oz. tubes and 1-lb. jars by druggists or order direct from

TAILBY-NASON CO., BOSTON 42, MASS.

SEND FOR FREE SAMPLE OF

LAMO
(NASON'S)

**ALL-PURPOSE
LANOLIN COMPOUND SKIN CREAM**

3. Same standards of practice in all States and allow R.N.'s to have free reciprocity throughout the 48 States.
4. Floor duty in hospitals cut to eight-hour, five-day week and rotation of nurses.
5. Prohibit the use of the title "nurse" by nurse-maids and practical nurses; also the wearing of the white uniform and cap; *or*, give the R.N. a better title and uniform.
6. Appoint hospital counselors to arbitrate differences in opinions between bedside nurses and supervisors.
7. Allow nurses the freedom to live their lives off the job as they want to, (not according to the dictates of those who insist on making a cloistered nun of a free woman).

HELEN G. FRASER, R.N.
DETROIT, MICH.

Labor Opinion

Dear Editor:

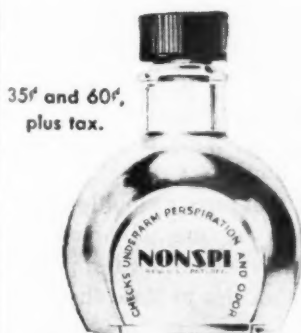
... I see nothing in your magazine of the A.F.L. nurses of Local 22173, Registered Nurses Union, picketing Cedars of Lebanon Hospital here in Los Angeles. I belong to the American Federation of State, County, and Municipal Employees Local 665, Police Employees Union. The only reason R.N.'s are underpaid is because they think they are too good to belong to labor unions.

My honorary retiring card from the Machinist, International Association of Machinists, Local 727 means

**TRY THIS COMPLETE
two-way deodorant!**

Send for a generous **FREE** sample of **NONSPI**—and the new booklet, "Deodorant Data," giving authoritative facts on perspiration control. Judge the merits of this dependable perspiration-stopper! You'll find **NONSPI** gives longer-lasting protection *two* ways—from underarm perspiration and odor. Wonderful on-duty guard for your uniforms—a must in your daily good grooming!

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☐ Please send me a Free sample of **NONSPI**, and the new booklet, "Deodorant Data."

Send _____ free "Deodorant Data" booklets for distribution to student nurses

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all thru the Night

NUMOTIZINE

Acts as a topical analgesic-decongestive treatment

for inflammatory conditions, glandular swellings, contusions, strains, furunculoses, abscesses.

—a cataplasm: apply to affected parts about 1/8 inch thick and cover with cloth or gauze.

NUMOTIZINE, Inc.
900 N. Franklin Street, Chicago

more to me than any A.N.A. or it's local counterparts could ever mean. From the American Federation of Labor, I learned that because I work for my living does not mean that my employer owns my soul. The only kindness I have ever known has come from the American Federation of Labor. I have learned to obey no arbitrary rulings of an M.D. or supervisor unless a majority of my brothers and sisters in my Union votes approval of the ruling.

Some day unionized R.N.'s will bring suit for defamation of character against some of these autocratic superintendents of nurses and other broken down nursing leaders. It takes more than a B.S. or M.A. to make a nursing leader . . .

The American Federation of Labor is fully informed on why R.N.'s are so bitterly misused in the nation's hospitals. I expect to see an International Union of R.N.'s within the next ten years.

MARY E. WAGNER, R.N.
LOS ANGELES, CALIF.

Dear Editor:

I dislike anything pertaining to a union. I have been wondering when they would invade the nursing field. Why should a nurse have to pay \$5 initiation fee, plus \$24 a year, as at St. Luke's Seattle to some gangster for the privilege of working at a certain hospital? This is still a free country, I hope.

I believe that nurses would get the same results as are obtained by unions if they went to the proper hospital authorities to state their de-

as

SEEK



A WISE
SELECTION

PERTUSSIN

as a rational therapy for coughs in

1. Acute and Chronic Bronchitis
 2. Paroxysms of Bronchial Asthma
 3. Dry Catarrhal Coughs
 4. Whooping Cough
 5. Smoker's Cough
-

The single therapeutic element in Pertussin is an extract of thyme (Process Taeschner) which is quickly absorbed and carried to the secretomotor center. It is highly beneficial in easing cough paroxysms not due to organic disease, because:

1. It stimulates secretion of the tracheobronchial glands to relieve dryness.
2. It facilitates the removal of mucus accumulation.
3. It improves ciliary activity.
4. It exerts a sedative effect on the irritated mucous membrane.

Pertussin is palatable, well tolerated, and free from any undesirable side action. It has been widely prescribed for over 30 years and deserves your recommendation for children, adults and the aged.

SEECK & KADE, INC.

NEW YORK 13, NEW YORK



Dennison DIAPER LINERS

Physicians and nurses have found that Dennison Diaper Liners make the diaper problem simpler and easier for new mothers. Physicians and nurses recommend Diaper Liners because they are sanitary and so soft next to baby's tender skin that they help prevent chafing and help guard against diaper rash.

Diaper Liners make diaper washing much less disagreeable. Hours of hard scrubbing are eliminated. The Liner is simply folded inside diaper. When soiled, the Liner is flushed away. Quick, simple, easy!

Suggest Dennison Diaper Liners to new mothers, and to your hospital, too. The cost is only a few cents a day.

Babypads—200 for \$1.00

Downee-soft—200 for 89¢

DENNISON, Dept. K-278
Framingham, Mass.

FREE Please send me a whole day's supply of Dennison Diaper Liners.

Name.....

Street.....

City.....Zone.....

State.....

mands. Most nurses gripe about their low pay in the locker rooms and consequently get nowhere. No wonder the unions will take over or try to do so.

CHARLOTTE S. DUBOIS, R.N.
MT. RAINIER, MD.

Self Improvement

Dear Editor:

Many nurses spend a great deal of energy in that old pastime, "gripping." Wouldn't it be more constructive to invest a little more time in self improvement instead? I will grant that there have been and still are conditions that need to be changed but I also think that we nurses need to change our way of thinking.

I believe we should get over the idea that supervisors or higher-ups are always picking on us. We should learn to accept the fact that hospital routine cannot change for our special pleasure...

R.N., CRAWFORDSVILLE, IND.

Collegiate Service

Dear Editor:

The health service at the University of Alabama has recently been expanded. We are greatly interested in the methods used at other colleges with an infirmary and would appreciate any information R.N. readers may have. Those engaged in seminar work who may want to write me, may do so by using the following address.

RUTH D. GRANT, R.N.
1107-12th Street
TUSCALOOSA, ALA.

DO YOU GO OFF DUTY With Aching Back and Feet?

A Light

SPENCER SUPPORT

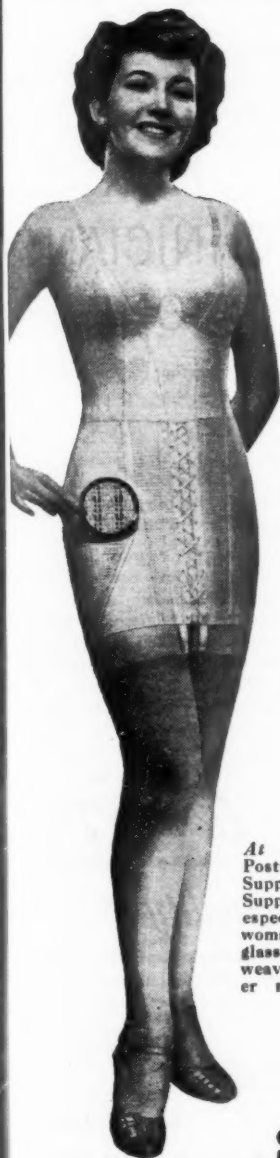
relieves muscular backache — lessens strain on feet, arches, legs—helps allay fatigue.

Your Spencer will be designed just for you to lift your sagging abdominal muscles—give restful support to your tired back; guide you into proper body balance.

Proper body-balance will free overworked muscles and ligaments of strain—distribute body-weight evenly, thus relieving feet, arches and legs of undue burden placed on them by wrong posture.

Spencers are prescribed by doctors for back pains and injuries, spinal arthritis, spinal curvature; for postoperative wear; for visceroptosis or nephrop-tosis with symptoms; for hernia, if inoperable or when operation is to be delayed; for wear during antepartum-postpartum period; for breast problems and after breast operations. Spencer corsetieres neither diagnose nor prescribe. If you have troublesome symptoms see your doctor.

Send coupon for fascinating booklet or look in telephone directory for "Spencer corsetiere"—or "Spencer Support Shop." Spencer Supports are sold by women dealers who have had special training qualifying them to follow your doctor's directions.



At left: Spencer Posture Corrective Support and Breast Support designed especially for this woman. Magnifying glass shows open weave fabric. Other materials, too.

WRITE FOR FREE BOOKLET



Lordotic Breast Ptotic
Posture Problems Posture

Spencer, Incorporated
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137 Derby Ave.,
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Send free booklet. I have checked my problem at left.

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Street

City & State 10-46

SPENCER INDIVIDUALLY DESIGNED SUPPORTS

Reg. U.S. Pat. Off.

For Abdomen, Back and Breasts

THE CLINIC SHOE

TRADE MARK REG U S PAT OFF AND CANADA

for Young Women in White



NURSES
TECHNICIANS
RECEPTIONISTS

America's finest shoe for young women in white who serve America day in and day out. Clinic shoes are light and airy, yet sturdy of sole. They fit so beautifully that they prevent foot fatigue long after other shoes have let tired muscles sag. Step into a pair of Clinics and save your beauty.

Unlined Clinics are built with an outside counter pocket making possible a smooth, seamless, inside finish. Clinics are made of top-grade leathers such as Hunt-Rankin's Bucko, Rueping's White Elk, also Nurocco and Evans' Brogandi Crushed Goat; all available with White Duxflex Nap Soles and White heels.

Priced to Retail

\$6⁹⁵ to \$7⁹⁵

according to Leathers

Your Assurance of Clinic Quality

"We, the makers of Clinic Shoes, having made quality footwear for a third of a century, (1914-1946) pledge ourselves to continue to use the best grade of materials and to constantly strive to improve the technique of shoemaking so that you, the Clinic shoe wearer, will at all times enjoy the highest degree of comfort available in a nurse's oxford. We

further pledge ourselves to continue to make Clinic shoes the best value obtainable...

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Clinic Shoemakers

AMERICA'S FINEST SHOE FOR YOUNG WOMEN

Birming
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New
Shreve

Bangor
Portland

Baltim
Baltim

IN V

ALABAMA

Birmingham: Loveman, Joseph & Loeb
Mobile: Jno. J. Damrich Co.

ARIZONA

Phoenix: Kortrick's, Inc.
Tucson: Jacome's

ARKANSAS

Fort Smith: Boston Store D. G. Co.
Hot Springs: Kempner's Shoe Store
Little Rock: Ike Kempner and Bros., Inc.
Texarkana: H. H. Watson

CALIFORNIA

Fresno: Rodder Shoe Co.
Hollywood: The Broadway-Hollywood
Long Beach: Dobyn's Footwear
Los Angeles: Broadway Dept. Store
Oakland: Chas. Kushins Co.
Pasadena: The Broadway-Pasadena
San Diego: The Marston Co.
San Diego: San Diego Shoe Co.
San Francisco: The Emporium
San Francisco: Sommer and Kaufmann

COLORADO

Colorado Springs: Vorhes Shoe Co.
Denver: The May Company
Pueblo: Cawcs-Beggs D. G. Co.

CONNECTICUT

Bridgeport: D. M. Read Co.
Hartford: Manning-Armstrong
Hartford: The W. G. Simmons Corp.
New Haven: The Fdw. Malley Co.
Waterbury: Miller-Peck Co.
Waterbury: Manning-Armstrong

DELAWARE

Wilmington: Kennard-Pyle Co.

DISTRICT OF COLUMBIA

Washington: Wm. Hahn and Co.
Washington: Frank R. Jelleff, Inc.

FLORIDA

Jacksonville: Cohen Bros.

GEORGIA

Atlanta: Davison-Paxon Co.
Atlanta: Rich's, Inc.
Augusta: Davison-Paxon Co.
Columbus: Miller-Taylor Shoe Co.
Savannah: Asher Shoes

IDAHO

Pocatello: The Peoples Store

ILLINOIS

Chicago: Marshall Field and Co.
Evanston: Marshall Field and Co.
Oak Park: Marshall Field and Co.

INDIANA

Evansville: Ben Becker Shoe Co.
Indianapolis: Marott Shoe Store, Inc.
South Bend: Robertson Bros. Dept. Store
Terre Haute: Ben Becker Shoe Co.

IOWA

Des Moines: Field Shoe Co.
Sioux City: T. S. Martin Co.

KANSAS

Topeka: Seelye Shoe Co.
Wichita: Head Shoe Co.

KENTUCKY

Louisville: Baynham Shoe Co.

LOUISIANA

New Orleans: Maison Blanche Co.
Shreveport: Phelps Shoe Co., Ltd.

MAINE

Bangor: Enterprise Shoe Co.
Portland: Davis and Cartland Co.

MARYLAND

Baltimore: S. Dalsheimer & Bro.
Baltimore: Hutzler Bros. Co.

THE CLINIC SHOE

for Young Women in White

Lack of Space Prevents Listing of All Clinic Dealers

MASSACHUSETTS

Boston: Wm. Filene's Sons Co.
Fall River: R. A. McWhirr Co.
Holyoke: Thomas S. Childs, Inc.
Pittsfield: England Brothers
Springfield: Forbes and Wallace, Inc.
Worcester: Denholm and McKay Co.

MICHIGAN

Ann Arbor: Wm. Goodyear and Co.
Detroit: J. L. Hudson Co.
Flint: Walk-Over Boot Shop
Grand Rapids: Chas. Trankla Co.
Jackson: Walk-Over Boot Shop

MINNESOTA

Duluth: Freimuth's Dept. Store
Minneapolis: The Dayton Company
Minneapolis: Home Trade Shoe Store
Rochester: C. F. Massey Co.
St. Paul: The Emporium of St. Paul

MISSISSIPPI

Jackson: R. E. Kennington Co.

MISSOURI

Columbia: C. B. Miller Shoe Co.
Joplin: Christman D. G. Co.
Kansas City: Robinson Shoe Co.
St. Louis: Famous-Barr Co.
Springfield: Walk-Over Shoe Store

MONTANA

Great Falls: J. E. Kenkel and Co.
Helena: Thistlewaite Shoe Co.
Missoula: Missoula Mercantile Co.

NEBRASKA

Omaha: J. L. Brandeis and Sons

NEVADA

Las Vegas: Ronzone's Dept. Store
Reno: Sunderland's

NEW HAMPSHIRE

Concord: The Thorne Shoe Co.
Portsmouth: Shaine's

NEW JERSEY

Newark: Hahne and Co.
Paterson: Stenchever's
Perth Amboy: Ruthal's

NEW MEXICO

Albuquerque: Paris Shoe Store
Santa Fe: Pfueger's

NEW YORK

Brooklyn: Frederick Loeser Co.
Buffalo: Flint and Kent
New York: Bloomingdale Bros., Inc.
New York: Stern Brothers
New York: John Wanamaker
Rochester: Wm. Eastwood and Son Co.
Syracuse: Park-Brannock Shoe Co.
Troy: Wm. H. Frear Co., Inc.
Utica: C. Sautter's Sons

NORTH CAROLINA

Charlotte: Al Goodman
Durham: R. L. Baldwin Co.
Raleigh: Taylor's
Winston-Salem: Belcher's, Inc.

NORTH DAKOTA

Fargo: The O. J. de Lendrecie Co.
Grand Forks: Rand Shoe Co.

OHIO

Akron: The M. O'Neill Co.
Canton: Harry L. Smith, Inc.
Cincinnati: Potter Shoe Co.
Cleveland: Wm. Taylor Son and Co.
Columbus: The F. and R. Lazarus and Co.
Dayton: The Elder and Johnston Co.
Springfield: Nisley Shoe Co.
Toledo: The LaSalle and Koch Co.

OKLAHOMA

Enid: Newman Merc. Co.
Muskogee: Durnil's Dry Goods Co.
Oklahoma City: Keer's, Inc.
Tulsa: Stern & Levy Walk-Over Shop

OREGON

Portland: Meier and Frank Co., Inc.

PENNSYLVANIA

Harrisburg: Bowman and Co.
Philadelphia: S. Dalsimer and Sons
Philadelphia: Strawbridge and Clothier
Philadelphia: John Wanamaker
Pittsburgh: Kaufmann's Dept. Stores, Inc.
Reading: Manning-Armstrong
Scranton: Lewis and Reilly, Inc.

RHODE ISLAND

Providence: The Outlet Co.

SOUTH CAROLINA

Charleston: Jas. F. Condon & Sons, Inc.
Columbia: Cullum's
Greenville: Ivey-Keith Co.
Spartanburg: Wright-Scruggs Shoe Co.

SOUTH DAKOTA

Aberdeen: Webb Shoe Co.
Rapid City: F. & M. Bootery
Sioux Falls: Johnson Shoe Co.

TENNESSEE

Chattanooga: Miller Bros. Co.
Memphis: The John Gerber Co.
Memphis: Walk-Over Shoe Store
Nashville: Harvey's

TEXAS

Corpus Christi: M. Lichtenstein & Sons
Corpus Christi: Perkins Bros.
Dallas: Sanger Bros.
El Paso: The Popular Dry Goods Co.
Fort Worth: Fair Dept. Store
Fort Worth: W. C. Stripling Co.
Galveston: E. S. Levy Co.
Houston: Krupp and Tuffy, Inc.
San Antonio: The Guarantee Shoe Co.

UTAH

Salt Lake City: Z. C. M. I. Dept. Store

VERMONT

Burlington: Gee's Shoe Store
Rutland: Wilson Clothing Co.

VIRGINIA

Alexandria: Bradshaw's Shoe Store
Danville: R. C. Thompson & Co.
Newport News: Adams Shoe Store
Richmond: Miller and Rhoads, Inc.

WASHINGTON

Seattle: Frederick and Nelson
Seattle: Nordstrom's
Spokane: The Palace Dept. Store
Spokane: Spokane Dry Goods Co.
Tacoma: Baxter's Shoe Store

WEST VIRGINIA

Parkersburg: Dils Bros. and Co.
Wheeling: Alexander and Co.

WISCONSIN

Milwaukee: Milwaukee Boston Store, Inc.

WYOMING

Cheyenne: Wasserman's Shoe Store

IN WHITE — COMFORTABLE, STURDY, BEAUTIFUL



'Bo-Car-Al'

HYGIENIC POWDER

A delicately scented,
soothing, astringent,
deodorant powder with
mild antiseptic properties for
feminine hygiene.

SHARP & DOHME

Box 7259, Philadelphia 1, Pa.

Gentlemen: Without charge, please send me a generous supply of 'Bo-Car-Al' Hygienic Powder.

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Street _____

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Science Shorts

Major Morgan Sargent of the Army Medical Corps points out that backache is a frequent complaint among persons with anxiety states, and that backaches caused by muscular tension and fatigue improve when the anxiety state is relieved by psychiatric treatment.

A report in the *American Journal of the Medical Sciences* tells of 532 men who spent a year on a tropical island where filariasis was prevalent. Over 36 per cent of them were found to be infected, but most men were symptom-free after they had been out of the endemic area for several months.

The annual absence rate of industrial workers due to diseases of the teeth and gums is 4.7 per cent, according to the American Dental Association. Women have an absence rate almost twice that of men.

Major Leon Reznikoff, M.C., A.U.S., reports on 300 schizophrenic soldiers treated with electric shock in a military hospital. There were no deaths, and no serious complications occurred. He suggests that the results obtained were generally superior to those in a civilian hospital because in military personnel the dis-

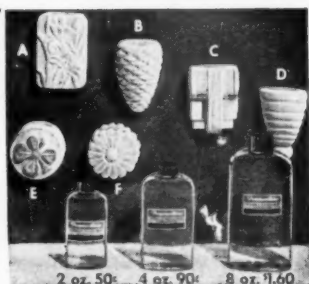
order is of shorter duration, more sudden onset, and has a definite environmental factor.

Patients respond to occupational outlets more readily if they are under 25 years of age, and men of better education show decidedly more interest than those who have had little schooling, according to an article in *Occupational Therapy and Rehabilitation*.

A report in the *Lancet* tells of the treatment of 32 cases of leukemia with urethane. Observed over a period of 11 months, the effects produced a definite fall in the white-cell count. Treatment is still in the experimental stage, but there are hopes that permanent benefit may result.

An article in the *Journal of the American Medical Association* reports the beneficial use of aluminum hydroxide gel for patients with excoriated bowel fistulas, and also that it is a successful deodorant.

A new glucoside extracted from a plant growing in Madagascar has been found effective in the treatment of leprosy, has announced the French Ministry of Information. It is possible that "asiaticaside" as it is



KEEP YOUR ROOMS *Fresh & Fragrant*

Nurses and Doctors can have the fresh, clean fragrance of a country garden in their offices and homes all year 'round by simply pouring a spoonful of *Fragrantaire House Perfume* into an inconspicuous clay perfumer. The perfume is immediately absorbed by the porous clay and a delightful scent is diffused throughout the room for as long as a week. There are 18 wonderful scents from which to select your favorite. *Fragrantaire* is a fine quality perfume which adds a fresh, delicate fragrance to the air.

CHOICE OF 18 ENTRANCING SCENTS

Mountain Pine, Gardenia, Apple Blossom, Bouquet, Spice and Herbs, Trefle, Lavender, Honeysuckle, Narcissus, Carnation, Chypre, Rock Garden, Sandalwood, Violet, Oriental, Rose, Lilac, Jasmin.

2 OZ. BOTTLE 50c, 4 OZ. 90c, 8 OZ. \$1.60
(Specify scent and size of bottle)

Choice of 6 attractive wall perfumers 50c each. Specify by letter as illustrated.

If you send remittance with order, we pay the postage or we will ship C.O.D. plus postage.

FRAGRANTAIRE CO., Dept. N-4
118 EAST 28th STREET, NEW YORK 16, N. Y.
Store Hours 9 A.M. to 5 P.M.

named, dissolves the waxy capsule of Hansen's bacillus, rendering it vulnerable to other drugs.

Drs. M. Edward Davis and Ethel L. Potter of Chicago have conducted tests which support the thesis that respiratory activity in the human fetus in utero is developed very early in fetal life. During intra-uterine period, respiratory activity is intermittent, shallow, and irregular but causes free circulation of amniotic fluid throughout the lungs. This fluid is exchanged for air after birth.

After administration of opium alkaloids, the vitamin C concentration in various body organs is decreased, according to a report from England.

A paper published in the *Bulletin of the Johns Hopkins Hospital*, by the late Dr. Walter E. Dandy, a famous brain surgeon, presented evidence that the seat of consciousness is slightly in front of the mid-brain, almost in the center of the skull cavity, on a plane level with the eyes.

Doctors Vassaf and Hall of Arlington, Mass., report that alcoholics can be weaned from drink more rapidly by insulin injections than by gradual withdrawal of alcohol.

Writing in the *Journal of the Kansas Medical Society*, Drs. Owens and Rubbra suggest that cotton is inexpensive, and easy to handle, and gives a lower rate of wound com-

From style-wise California

**uniforms sparkling
with feminine charm**

Out of the land of sun and fashion, Bruck's has brought style No. 6400. Action back for grace and comfort, pert flapped pockets, sewed-in belt loose in front for perfect waist adjustment, seven gore skirt, detachable buttons. Here is a uniform which combines the appeal of high fashion with professional dignity.

Order Today!

In crisp, long-wearing Shantyn* with detachable buttons.

Sizes

Jr.: 11, 13, 15, 17

Misses: 10, 12, 14, 16, 18

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\$5.95

Long or Short Sleeves

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Gentlemen:

Please send me.....No. 6400 uniforms for which I enclose \$..... I prefersleeves.

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M. BURNEICE LARSON, *Director*

If perfect hours plus perfect salary added up to perfect happiness in a position—our mission of helping RN's glean the greatest measure of happiness from their profession would be greatly simplified. But we have found that happiness depends to a much greater extent on the intangibles—stimulating work, congenial co-workers, a pleasing climate, recreational opportunities for off-duty hours . . .

We have developed an analysis sheet designed to reveal your personality and personal preferences as well as your professional background. Our recommendations will take all of these factors into consideration.

If cold winters depress you we shall point out positions *south* of the Mason Dixon line rather than on the Canadian Border. If concerts and the theater are the forms of relaxation you prefer we shall make it a point *not* to list opportunities in hamlets far removed from these metropolitan delights. If you like to be greeted, however, from all sides as you move down a street—and can enjoy a cozy evening with Gregory Peck or a good library book—hamlets may prove heaven to you.

Should you be considering relocating at this time we hope you'll send for our analysis sheet. We'll enjoy suggesting opportunities which seem most perfectly suited to you. All correspondence is conducted on a confidential basis.

M. BURNEICE LARSON

Director, THE MEDICAL BUREAU
Palmolive Building Chicago 11

plications than catgut when used as sutures, but actually, stainless steel wire is the finest material, causing fewer wound complications.

Only the patients' objections to its use make surgeons reluctant to employ it more frequently.

Tests have shown that penicillin administered to the mother is transmitted to the fetus as early as the tenth week of gestation.

Synthetic testosterone has been derived from sarsaparilla root which grows in abundance in Mexico. Although used in the treatment of muscle atrophy and angina pectoris, its greatest value is in its ability to renew man's vigor. The languid Mexicans are amused by this discovery.

Well-dried streptomycin has been kept successfully for a year and has been found to be in perfect condition without loss of strength.

An article in the *Medical Woman's Journal* advocates medication in some specific cases of behavior disorders where it is proved after a careful check that the instability is due to an organic disturbance. In addition to vitamins and endocrine therapy, the use of the hydantoin derivatives, benzedrine, phenobarbital, and belladonna is suggested.

Commander James L. McCartney, M.C., U.S.N.R., writing in the *Military Surgeon*, suggests that neurosyphilis may be uncommon in the

This is Anacin's Day

THURSDAY



The Quick-Acting Analgesic

Yes . . . when regular menstrual pains begin it's time to think of Anacin . . . and of the quick, friendly relief available from this outstanding analgesic. Think of it, too, whenever you encounter simple headache or minor neuralgia. Anacin, of course, is always on hand at your hospital pharmacy or neighborhood drug store.

WHITEHALL PHARMACAL COMPANY, 22 E. 40th Street, New York 16, N. Y.



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**SINCE THEY WERE BABIES—
THE QUINTUPLETS**
always used this for coughs of

CHEST COLDS

The Quintuplets have always relied on Musterole for coughs, sore throat and aching muscles from colds. It *instantly* starts to bring wonderful, long-lasting relief! Musterole helps break up painful surface congestion, too. Musterole is one rub you can suggest to your patients with confidence. Just rub in on the chest, throat and back.

In 3 Strengths: Children's Mild Musterole for the average baby's skin. Regular and Extra-Strength for grown-ups.

MUSTEROLE

tropics because the organism causing yaws, *Treponema pertenue*, creates a defense against the invasion of the nervous system by the *Treponema pallidum*.

An article in the *Lancet* points out that dried pathogenic penicillin-sensitive organisms may remain viable for a considerable period in contact with commercial dried penicillin. When this mixture is dissolved and injected into animals it may cause infection. Therefore, the sterility of dried penicillin should be tested before use.

The number of people dying from appendicitis in the United States has decreased by about two-fifths in the past three years, according to the *Digest of Treatment*.

Hyperimmune human pertussis serum provides a quick, safe, and effective means of producing passive immunity to whooping cough, and can greatly reduce the incidence of the disease, according to Dr. Edwin P. Ewers of Warsaw, N.C.

The *Journal of the American Dental Association* reports a new method through which teeth can be used as an index for identification of nearly all of the "unknown" dead of World War II. It is based on a code for translating dental records into numbers which can be punched out at the rate of 400 an hour on automatic machine record cards and sorted at the rate of 500 per minute to locate any individual record.

Tests*

1 Ed

2 Ed

3 Ed

4 Ed

5 Ed

6 Ed

CONC
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*N. Y.

How irritation varies from *different* cigarettes

Tests made on rabbits' eyes reveal the influence of hygroscopic agents*

TYPE OF CIGARETTE

Cigarettes made by the
PHILIP MORRIS method

1 Edema 0.8

Cigarettes made with
no hygroscopic agent

2 Edema 2.1

Popular cigarette #1
(ordinary method)

3 Edema 2.7

Popular cigarette #2
(ordinary method)

4 Edema 2.6

Popular cigarette #3
(ordinary method)

5 Edema 2.7

Popular cigarette #4
(ordinary method)

6 Edema 2.7

CONCLUSION:* Results show that regardless of blend of tobacco, flavoring materials, or method of manufacture, the irritation produced by all ordinary cigarettes is substantially the same, and measurably greater than that caused by PHILIP MORRIS.

CLINICAL CONFIRMATION:** When *smokers* changed to PHILIP MORRIS, substantially every case of irritation of the nose and throat due to smoking cleared completely or definitely improved.

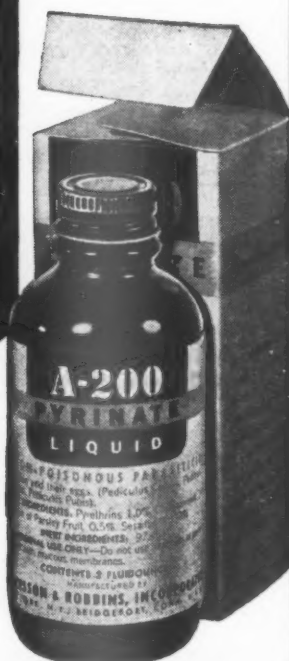
*N. Y. State Journ. Med. 35 No. 11,590 **Laryngoscope 1935, XLV, No. 2, 149-154

The *New* Liquid

A-200

PYRINATE

SCIENTIFICALLY DEVELOPED



The amazing new liquid A-200 PYRINATE is a most effective preparation for killing crab, head and body lice *and their eggs. It kills on contact!*

Developed under medical supervision, the new A-200 was thoroughly tested in laboratories, clinics, and penal institutions. Results show it to be *non-toxic, non-irritating*, and it leaves *no tell-tale odor*. Liquid A-200 has a soothing shampoo effect, leaving the hair soft and pliable.

One of the 225 products made by
McKesson & Robbins for your health and comfort.

Liquid A-200 is especially recommended for children. Applied and removed in only a few moments. No fuss—no bother. No greasy salve to stain clothing. At all drug stores, 79¢.

Formula

Active Ingredients: Pyrethrins 1.0%, Dinitroanisole 1.0%, Oleoresin of Parsley Fruit 0.5%, Sesamin 0.037%, Inert Ingredients 97.463%.

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Famous for Quality Since 1833

Wh
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"Safe
cloth
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In addition
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Why more nurses use ARRID than any other deodorant

"Safe for skin," "safe for clothes," "more effective in stopping perspiration and odor" are main reasons R. N.'s prefer Arrid in 1946 coast to coast survey.



New York, 1946:

Questions answered by 3,221 nurses in an independent, impartial coast to coast survey of deodorants today confirm previous findings in this field. By a dramatic margin, more nurses use Arrid than any other deodorant.

In addition to its leadership with nurses, tabulations also show Arrid is used by more men and women everywhere.

Realization among nurses of the importance of a safe deodorant was evident in the large number who stated "effect on skin" as their major reason for choosing Arrid. Answers included such words as "non-irritating," "antiseptic" and "soothing."

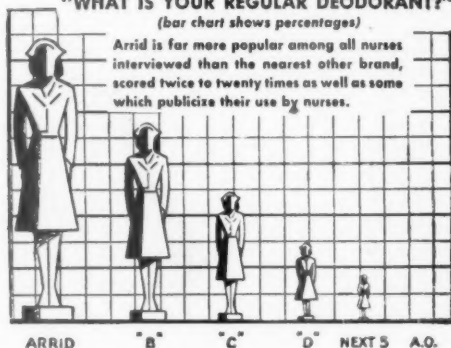
"Safety to clothes" also scored high (Arrid has been awarded the Seal of Approval of the American Institute of Laundering for being harmless to clothes) while "effectiveness in preventing perspiration and odor" topped all other reasons given by nurses for making Arrid their regular deodorant as well as the main reason many have switched to Arrid from less popular brands.

Many nurses also mentioned Arrid's creamy texture, pleasant odor, comfort and convenience.

NOTE: research techniques, exact percentages, and detailed results are available to authorized groups.

CARTER PRODUCTS, INC. New York, N.Y.

3,221 Nurses Reply to Question "WHAT IS YOUR REGULAR DEODORANT?" (bar chart shows percentages)



No Other Deodorant — Only ARRID STOPS PERSPIRATION and ODOR so Safely yet so Effectively

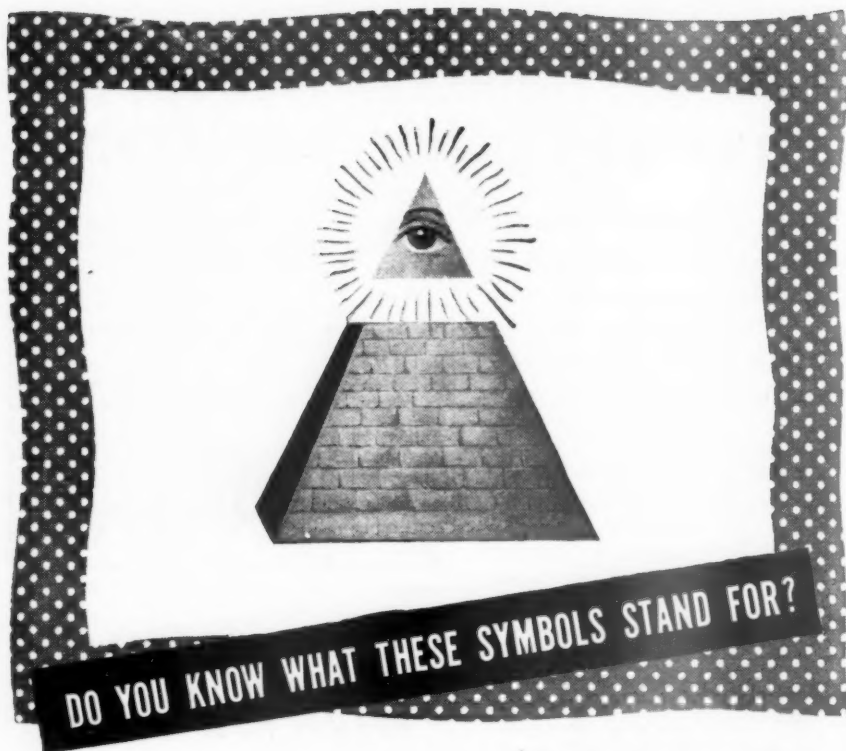
Professionally and personally, you know how important protection from perspiration and odor can be. Use *new improved* Arrid, safe for skin, safe for clothes, utmost safe protection from social offense. Buy a jar of *new improved* Arrid today!



New Improved Postwar

ARRID

All Postwar Arrid packages have a star* above the price 39¢ plus tax, also 10¢ and 59¢



DO YOU KNOW WHAT THESE SYMBOLS STAND FOR?

The figure above, appearing on the back of one-dollar bills, is the reverse of the great seal of the United States. It depicts a pyramid as a symbol of strength—unfinished, because there is still work-of-state to be done—and over it the approving eye of Deity.

To the left is another symbol that has earned wide approval. It is the Rexall sign of dependable drug service, appearing in conveniently located pharmacies throughout the country. Wherever you see it, fine, laboratory-tested Rexall products and the skill of selected pharmacists to compound them, are at your service.



REXALL FOR RELIABILITY

UNITED-REXALL DRUG CO.

LOS ANGELES, CALIFORNIA

Pharmaceutical chemists for more than 43 years

Memo from the Editor

NATIONAL AGITATION REGARDING the nurse shortage continues at such a pace that we are on the brink of developing a mass neurosis among those nurses who are nursing and thus bear the brunt of public opinion. It is a repetition of the wartime cry for more and more nurses when some 80,000 were already doing service with the armed forces.

Throughout all the publicity released to the press and among all the statistics purporting to explain the shortage, the veteran R.N. seems to be taking a beating. She is leaving nursing entirely, or going into federal civil service or the nursing specialties, says the propaganda. She is being lured away from her former civilian employment by the sight of greener grass elsewhere.

Now all, or some, of this may be true. But the fact of the matter is nobody knows as yet what *has* happened to the veteran nurse. Recently, the Veterans' Administration made a survey of 1,800 former enlisted Wac's and Waves and found that "the majority of women veterans do not want to return to prewar jobs." Nurses were not included in the survey. Yet widely quoted figures claim that "16 per cent of veteran nurses have not returned to former jobs." This came from a joint Army-A.N.A. survey completed in the spring of 1945 and was based not on the accomplished fact but on what nurses in the service *thought* they were going to do when they came out.

In a month or two, the Women's Bureau of the Department of Labor, in the first such effort since the war, will launch a survey covering 40,000 nurses on current State registration lists. They will also query several hundred nurses known to have left nursing. In both groups there will unquestionably be found veteran nurses. When the questionnaires are tabulated, we should know where the nurses are and what they are doing, and why some nurses have left nursing.

It may take six or eight months to tabulate the results. In the meantime, let's stop blaming the veterans for the nurse shortage.

—DOROTHY SUTHERLAND



Highlights of this Year's Biennial Convention

by Dorothy Sutherland

LAST MONTH MARKED both the fiftieth anniversary of the American Nurses Association and the first peacetime biennial convention of the national nursing associations since 1940. Drawn by the importance of matters to be discussed, some 8,000 R.N.'s—about 2,000 of them voting delegates—came from all over the U.S. to Atlantic City, New Jersey, to witness nursing history in the making.

This conference did make nursing history.

First, it wrote and adopted a new Bill of Rights for professional nurses. It considered and recommended future action on a revolutionary proposal for reorganizing all nursing associations into one vast but cohesive unit. It unanimously adopted a new economic security program for nurses and authorized A.N.A. State and district branches to act as sole collective bargaining agents for members. It voted an increase in A.N.A. dues to \$3 a year to implement this program. And it established the A.N.A. as the sole agency to initiate and pursue federal legislation affecting nurses.

Experienced conventioners agreed this was an impressive achievement,

especially by comparison with the slow-moving pace of some past Biennials. Several extra business sessions were called in addition to those originally scheduled, in order to allow ample time for discussion of the many significant issues up for vote.

On the negative side, the conference failed to take a clear-cut stand for or against socialized medicine, although discussion from the floor indicated that the majority of those present wanted this topic brought out in the open. And, when most of the delegates had already gone home, those remaining killed a special committee recommendation to cease A.N.A. participation in the National Nursing Council, should that organization be continued after November first of this year.

Without question, however, the conference more than compensated for the business left pending by the firm stand it took on economic security. And the leadership expressed both from the floor and the platform was plain evidence that the A.N.A. means business and is determined to get things done.



Here are some details on what the convention accomplished:

PLATFORM FOR A.N.A.

1. Improvement in hours and living conditions for nurses, so that they may live a normal personal and professional life. Specifically, action toward (a) wider acceptance of the 40-hour week with no decrease of salary . . . and (b) minimum salaries adequate to attract and hold nurses of quality, and to enable them to maintain standards of living com-



parable to other professions.

2. Provision for optimal nursing care for all, and furtherance of a positive health program in all communities.

3. Increased participation by nurses in the actual planning and in the administration of nursing service, in hospitals and other types of employment.

4. Greater development of nurses' professional associations as exclusive spokesmen for nurses in all questions affecting their employment and economic security. Such a development should be based on past successful experience of professional nurses' organizations in collective bargaining and negotiation.

5. Removal, as rapidly as possible, of barriers that prevent the full employment and professional development of nurses belonging to minority racial groups.

6. Employment of well-qualified

practical nurses and other auxiliary workers under State licensure, thus protecting both the patient and the worker.

7. Continuing improvement in the placement and counseling of nurses, to give greater stability and job satisfaction to the profession and to facilitate a better distribution of nursing service to the public.

8. Further development of nursing in prepayment health and medical care plans, in order to spread the cost of nursing service to the public.

9. Maintenance of educational standards, and development of educational resources, that nursing may keep abreast of the rapid advances in medicine and other sciences. Such a development may well require federal subsidies and contribution from foundations and other educational philanthropies.

10. Appraisal of our own national organizations, through the report of the Structure Study, and fearless action based upon such appraisal, to make sure that the nursing profession will be organized and equipped to deal most effectively with its problems and its opportunities.

These ten points were presented by President Katharine Densford at the opening session, left with the



delegates for consideration during the week, and finally discussed and passed on the last day.

COLLECTIVE BARGAINING

Without one dissenting voice, the delegates voted to adopt the Advisory Council's recommendations on economic security. Here is the statement as approved by the delegates:

"The American Nurses' Association believes that the several State and district nurses' associations are qualified to act and should act as the exclusive agents of their respective memberships in the important fields of economic security and collective bargaining. The Association commends the excellent progress already made and urges all State and district associations to push such a program vigorously and expeditiously.

"Since it is the established policy of other groups, including unions, to permit membership in only one collective bargaining group, the Association believes such policy to be sound for the State and district nurses associations."

The first paragraph is, in essence, an ultimatum to the various States to get busy on specific programs directed toward improving the status of local nurses. It is up to the States to decide what their programs will be and to get them under way. But the A.N.A. will offer guidance through its Committee on Economic Security for Nurses, will publish a manual on the technique of bargaining collectively, and will also send field workers to the various States to assist whenever help is requested.




Under paragraph two, nurse members of labor unions will not be eligible for membership in the A.N.A. The individual nurse is free to choose membership in either a labor union or the A.N.A., but if her professional association and the union are each engaged in collective bargaining, she must select one or the other to represent her. She may not assign her bargaining rights to more than one organization.

Although labor union nurse members were known to be attending the convention, they made no comments during the discussion preceding the unanimous approval of this economic security policy, nor during the various program meetings at which collective bargaining was discussed.

FEDERAL LEGISLATION

The delegates approved a committee report and passed a resolution to the effect that the A.N.A. "be recognized as the national nursing organization" with responsibility to represent nurses on all legislative

NEW YORK
JAN 1947



matters of national import which affect them. Having representatives of more than one nursing organization approach Congressmen, or work with various federal agencies on measures affecting nurses or nursing, the convention agreed, "is detrimental to nursing because it confuses issues, dissipates interest, interferes with the timing of planned programs, and implies lack of unity."

An interesting sidelight here is the recommendation of the special committee on relationship of A.N.A. to other agencies. This committee had urged that, "should the National Nursing Council not be dissolved by November 1, 1946, the A.N.A. withdraw from the Council and from participation in all activities of Council committees as of October 1, 1946 . . ." In reporting its review of the program of the N.N.C., the committee said:

"It is unsound practice for one organization, namely the A.N.A., to be responsible for legislative activity for nurses and for a second national nursing group, the National Nursing Council, to analyze federal bills and to release their analyses to nursing and other groups. Action should be based on analyses made and released by the same nursing association . . . which is responsible for such action . . ."

Inasmuch as the delegates rejected the proposal to discontinue participation in the N.N.C., and voted to sustain the Council "for the duration plus," the Council will have to revise or discontinue its Committee on Nursing Legislation

or find itself in direct conflict or competition with the policy of its largest member association.

STRUCTURE STUDY

Raymond Rich Associates submitted their report recommending drastic changes in the structure of national nursing associations, bringing all into one group, suggesting increased authority for district associations in the State structure, and recommending a National Academy of Nurses to be in charge of nationwide standard registration. The delegates accepted the report and voted to send it to the various States for study and analysis to be completed not later than April 1, 1947, and instructed the Structure Study committee to compile and summarize the reactions of the State associations for publication by May 15th. A special meeting of the House of Delegates will be called not later than October 1, 1947, to take action on the proposed revision.

The Rich report is published in full in this month's *American Journal of Nursing*.



These few facts merely skim the surface of action taken in Atlantic City. But they should indicate that even without the reorganization suggested by the Structure Study, the A.N.A. stands at its half-century mark with new life in its veins. Some nurses attending their first Biennial were unimpressed. But those of us who can look back over at least the last ten years, can recognize improvement and change, and—because of these—progress.

What They Said in Atlantic City



*Excerpts from Major Speeches
During the Biennial Convention*

PRESIDENT HARRY S. TRUMAN,
GREETINGS WIRED TO OPENING SES-
SION, SEPTEMBER 23.

I am happy to send the greetings of a grateful nation to the hundreds of thousands of American nurses represented by the delegates assembled at this convention, your first peace-time meeting in six years.

On behalf of your fellow citizens, I congratulate you upon the enviable record you have made in gallant service on the war fronts of the world, and on the health fronts throughout our country . . . Thousands, who would not otherwise be alive today, live because graduate and student nurses alike served so well.

The fighting with guns and bombs has ceased, and the strenuous battle for our Nation's health now demands our most powerful and unusual efforts. The future, I am sure, will reveal undreamed of opportunity for improving the health of our citizens.

☆

KATHARINE J. DENSFORD, PRESIDENT,
AMERICAN NURSES ASSOCIATION, AT
SEPTEMBER 23 AFTERNOON SESSION.

The same elements of ferment and unrest which we recognize in the nursing profession are at work in teaching and other professions. Let

us view our problems not as unique to nursing, but as a part of the upheaval in all planes of thinking and living, in all other countries as well as our own. If there is comfort in viewing our relatively fortunate position, let us remind ourselves that nurses have not been interrupted by war in their practice of nursing. We have just gone on nursing—harder and more continuously, in more difficult conditions, taking on more of the physician's responsibilities as they were laid on our shoulders. Never once have we been asked to stop nursing in order to man a machine gun or to make ammunition. We have been, throughout it all, never the *destroyers of life*, always its *healers and conservers and builders*.

☆

HON. HAROLD E. STASSEN, AT 50TH
ANNIVERSARY OF A.N.A. MEETING,
SEPTEMBER 25.

If the majority of each walk of life insist upon taking from society the maximum which they can obtain by unrestrained insistence, then the only manner in which anarchy can be avoided is for Government to move in a totalitarian direction. In other words, then, Government must take unto itself the great powers that are

needed to place the restraints upon men which they will not place upon themselves. This can have no other result than the wiping out of individual freedom, the destruction of initiative, the loss of resilience, the decrease of productivity, the lowering of the standard of living, and the deterioration of the character of a people.

But if a people discipline themselves, if they have a concept of contribution to their fellowmen to take its place along with their own desire for self-preservation and individual progress, then Government can and should with the minimum of powers and the maximum of individual liberty establish an atmosphere for true progress in human welfare and for peace between the nations.



ANNIE W. GOODRICH, R.N., DEAN EMERITUS, YALE SCHOOL OF NURSING, AT SEPTEMBER 23 EVENING SESSION.

In the immediate future all nurses must be trained in universities if nursing is to keep in step with advancements in medical and social sciences.

The doors of our universities and colleges are opening to students of the practical arts, thereby enriching their lives as well as broadening their contribution in their chosen field of activity.



CECILE BLOCK, STUDENT AT ADELPHI COLLEGE SCHOOL OF NURSING, GARDEN CITY, N.Y., AT SEPTEMBER 23 DAY SESSION.

Student nurses are adults, and should be able to govern themselves

just as college students are allowed the honor system.

The economic stability of a nurse must be assured. The hours of work, recreation, and vacation must be more definitely defined and benefits must be extended to the nursing profession.

If the public cannot do these things, then they must be subsidized or paid for out of a broad voluntary insurance program. Only in this way can the proper candidates for nursing be attracted to the profession.



SENATOR CLAUDE PEPPER, FLORIDA, AT SEPTEMBER 26 EVENING SESSION. "WHO SHALL PAY FOR NURSING EDUCATION?"

At present the public and the patient are really paying for a deterioration in nursing service by reason of increased fees for medical care, accompanied by a nursing shortage and a relative decline of enrollments in nursing schools . . .

High quality nursing service can only be provided with sufficient personnel, well trained in the basic principles of nursing and in specialized fields of nursing. Higher pay, shorter hours, improvement of working conditions, provision of social security benefits for nurses, and other proposals, will help to relieve the situation. But these remedies alone will not solve the problem. Some means must be found to finance nursing education.

The public and the patient must pay for nursing education if high quality nursing care is to be provided for our people. Nursing education,

like other forms of professional education, should be directly financed by the individual, his family, and by tuition abatements, loans, scholarships and fellowships, paid from private and public sources. The National Mental Health Act is a step in this direction. Passage of the Wagner-Murray-Dingell Bill, the Maternal and Child Health Welfare Bill, the Murray-Pepper-Morse Education Bill, would further nursing education and thereby raise the level of high quality nursing care to the benefit of the American people.



HON. HAROLD E. STASSEN, AT 50TH ANNIVERSARY OF A.N.A. MEETING, SEPTEMBER 25.

It is my view that we must develop and improve medical and health care for this country. To do this will require federal assistance, particularly as to those States and areas which are limited to their own resources in the income of their people. Their needs must be a bolstering of public health services and hospital facilities and of medical and nursing availability. Each of these should be accomplished without destroying the characteristic independence of the professions of medicine and nursing and without substituting governmental order and direction for the ethics or service of the profession. The program should build upon the existing medical, hospital and nursing services and not seek to make a sweeping substitution for the entire structure. It should seek to meet the needs and deficiencies that exist, rather than to revolutionize the entire approach.

KATHARINE J. DENSFORD, PRESIDENT, AMERICAN NURSES ASSOCIATION, AT OPENING SESSION, SEPTEMBER 23.

Whenever you compare the number of nurses needed with those who are available, you find a mathematical deficit. The most recent estimate is that made by the Committee on Statistical Research of the National Nursing Council. This indicates that with 359,000 estimated as needed, and 317,800 actually or potentially available, there is now a probable deficit of at least 41,700. That is to say, demand has outstripped supply in a ratio of 100 to a possible 88. That deficit of 12 per cent can be widened or narrowed, as a great marginal number of nurses or potential nurses decide whether their requirements for working and living can be met in the nursing position. We do not know when supply can catch up with demand—if ever. But this vast expectation of the public for the best of nursing service challenges us to meet it as soundly and wisely and rapidly as we can.



THOMAS PARRAN, M.D., SURGEON GENERAL, U.S. PUBLIC HEALTH SERVICE, AT SEPTEMBER 24 EVENING SESSION. "NATIONAL AND INTERNATIONAL HORIZONS IN HEALTH."

Some essential steps required to assure equal opportunity for health to all groups in all areas of the country are:

1. A better distribution of doctors and other medical and health personnel throughout the country. The hospital law aids this objective indirectly.

2. Full-time public health departments in every part of the country. We now can move progressively toward this basic objective.

3. Strengthening of professional education in medical and related fields; only in mental health has any action been taken.

4. Encouragement and support of medical research; the Public Health Service has the authority in law; it is giving effect to that authority by giving more money than ever before has been available.

5. A workable plan which would give each individual ready access to all necessary medical, hospital and related services for prepayment of costs through taxes or insurance. On this sector little progress has been made . . .

Without good nursing, no national health program can be effective. Good opportunities are ahead of you. If you are to seize them, certain fundamental changes must be made within your own ranks. In nurse education, obvious reforms are long overdue.

The experience of the Public Health Service in the Cadet Nurse program confirms the well-known discrepancy in the quality of nurse training. The fundamental weakness is that most of the 1,300 nurse training schools are not primarily educational institutions but merely apprentice training adjuncts to a hospital. Dependent upon the hospital budget and service needs, you cannot hope to set up uniform standards or obtain your full professional [Continued on page 66]

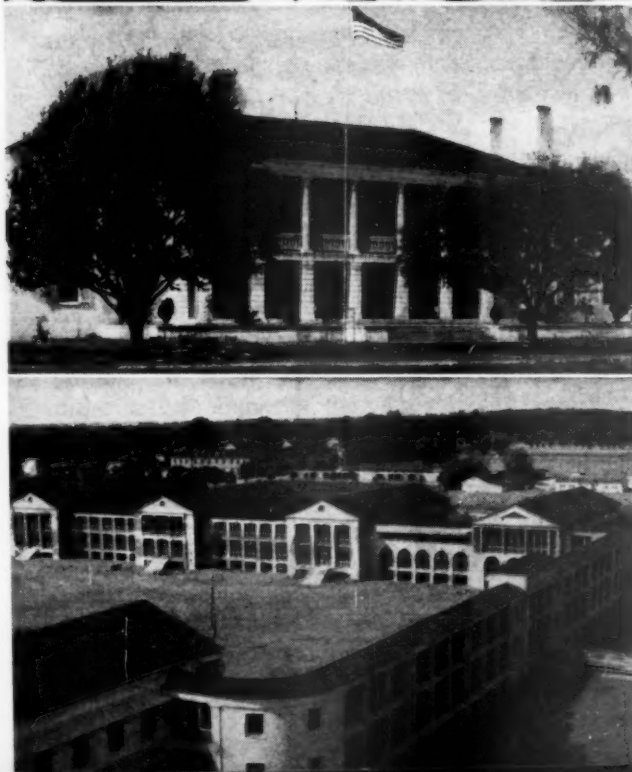
Probie



"The prognosis looks good."



Before diagnosis of Hansen's disease was confirmed, Mrs. Hornbostel had brief reunion with family in San Francisco.



Now at Carville, she is one of 400 patients carefully isolated by the attitude of an unenlightened American public.



Recreation Hall, dormitories, and grounds are attractive. Not so the barbed wire barrier, changing hospital to prison.

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The Shameful Stigma of Leprosy

by Kathleen Dean, R.N.

UNTIL VERY RECENTLY, I am ashamed to admit, I did not know of the existence in the United States of a national leprosarium. My impressions of leprosy were molded by the lurid fiction of recent years, and by Biblical stories of untouchables who went about crying "Unclean!" and were somehow associated with sin. I had heard stories from the older members of my New England family of the leper colony at one time located on Penikese Island in Buzzards Bay, just off the Massachusetts coast. In fact, along with the tales of the Salem witches, one of our favorite stories was the account of the horrible Jap with no hands who escaped from Penikese to the Massachusetts mainland in a small boat, causing havoc among the New England mothers, who guarded their children with primitive fear when the news reached them. The story is still told with horror by the

old wives here, and has never lost its spell as a thriller in this part of the country.

In the spring of 1946, leprosy again made the headlines. This time Mrs. Gertrude Hornbostel, attractive middle-aged wife and mother, who had survived the indignities of a Japanese prison camp in Manila, was diagnosed as having leprosy. The world was astounded and touched that her husband, an Army officer and survivor of the ill-famed Bataan Death March, wished to accompany her into forced exile at the National Leprosarium at Carville, Louisiana.

Mrs. Hornbostel made good news copy. The yellow sheets and sob sisters screamed: "Love More Powerful Than Fear," and "Till Death Do Us Part," until the United States reading public wondered what sort of horrible place this perfectly normal looking woman was being banished into. Actually, Carville is not



a "colony of the doomed," but a modern, well equipped hospital where patients receive first class treatment and the benefit of the most recent medical discoveries and from which, furthermore, they are discharged regularly. The hospital is a United States Public Health Service hospital, staffed by medical officers, and the nurses are the Sisters of Charity of St. Vincent de Paul. It is the widespread social stigma branding the disease as foul and repulsive which undermines these patients more surely and horribly than any aspect of the disease ever could.

The following is the text of a personal letter from Mrs. Hornbostel, who is now a patient at the United States Marine Hospital at Carville:

"I am only just beginning to get over some of the vertigo induced by the streptomycin with which I am saturated. I am one of ten guinea pigs, and find myself greatly improved after having been on the drug for two months and nine days. The treatment calls for four months of eight daily injections of 2,000,000 units of streptomycin, and five grains of diasone daily. I am the only one who gets diasone with it. Some of the others get promin in addition to the streptomycin; others get only streptomycin."

"I am increasingly aware, here at Carville, of things that need to be stressed to the American people in this so-called enlightened era. For instance, most people get their knowledge of leprosy, or Hansen's disease as we now prefer to call it, from Leviticus in the Old Testament.

If you will take the trouble to look it up, you will find that practically every one of the diseases he calls leprosy might be anything from prickly heat to scabies, yaws, tropical ulcers, measles, chicken pox, impetigo, small pox, syphilis, or plague. Some of these, of course, were highly contagious, whereas leprosy is not, according to the most eminent leprologists. Leviticus goes even further and talks of leprous houses and clothing. Something very definitely went wrong with the translation there, and we must also consider a great amount of superstition and old customs which have since been dropped, and only the fear and hysteria remain when the name is mentioned.

"I have been stunned to realize that there are very few doctors who can diagnose Hansen's disease. Out of five whom I visited during the last year, only one, the last one, made a correct diagnosis. A whole

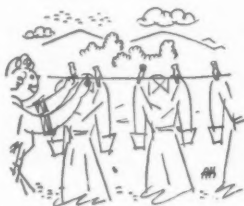


year was lost to me during which I could have had treatment, and during which the disease naturally got a greater hold on my system. Often, doctors will diagnose it as something else and will give the wrong treatment, which may aggravate the condition greatly. This happens quite frequently, as this disease may give

a positive Wassermann in many cases. From all I, who after all am only a patient, can deduce, a nasal smear and biopsy are the only sure ways of making a positive diagnosis. I say this with the weariness of a patient who has made the diagnostic rounds.

"I do not believe in segregation of

patients with Hansen's disease, except in open cases. Brazil is very much ahead of us in that respect. Hospitalization, yes, particularly if this streptomycin works out, as we all hope, for patients have decided reactions from the drug and need constant attention. But where promin and diasone are used, segrega-



Why Not Make Nurses Uniforms Uniform?

BY WALTER C. EMERY

PRESSING NURSES' uniforms is one of the most difficult and time-consuming jobs in a hospital laundry.

Unfortunately, the problem is one destined always to be with us. Within the foreseeable future, there will be nurses and they certainly will be wearing uniforms.

My complaint is neither with the nurses nor with the fact that they are uniformed. But what does cause extra work and expense for hospital laundries is that nurses' apparel is uniform in name only.

As matters now stand, individual nurses dress in "uniforms" that resemble each other only in the fact that they are white. They may be pleated or they may not. They may have six buttons or three. Their collars may be simple or they may be

very elaborate, while shoulders may either be heavily padded or contain no padding at all.

In short, to a hospital laundry, each "uniform" is an individual problem. An inexperienced presser must be painstakingly taught a dozen different techniques where one could suffice—if uniforms were uniform.

Furthermore, even experienced pressers cannot work at top speed if they must carefully size up each uniform before starting to work on it. Their speed and skill is never as highly developed as if each uniform presented exactly the same type of problem in pressing.

Possibly the loss of laundry production could be overlooked if the nurses themselves benefitted from the present set-up. However, they do not. The [Continued on page 96]

tion is no more necessary than in the case of a mild rheumatic, as long as the patient will report for his daily injection.

"As it is now, there are less than 400 patients here, fenced in behind a high wire fence, with barbed wire over the top and guards at the gate. But there are as many, if not thousands more, going about every day in America's towns and cities, without treatment and unnoticed."

Col. C. H. Rarey's forthcoming book, "Opportunities for Service to Mankind," as quoted in *The Star*, monthly publication of the patients at Carville, gives these startling figures on the prevalence of Hansen's Disease: "Did you know that this disease exists in practically every country in the world; that there are from three to five million victims in all; that approximately fifteen mil-

lion persons are exposed to and subject to contracting it; and that among its victims twelve hundred to twice that number are in the continental United States?"

Twelve hundred to 2,400 people with Hansen's disease in the United States, and only four hundred at Carville, the only leprosarium in the country! Here is your great American reluctance—"Don't Fence Me In"—and fear of the dreaded stigma at work.

Mrs. Hornbostel goes on:

"Thus, segregation defeats its own purpose, which is to eradicate the disease, for people do not crave the indignity of being treated like criminals when they are sick, and *because* they are sick. Neither do they appreciate being moved from cool and healthy localities into the hot, damp cypress [*Continued on page 78*]

Housing Shortage

On every branch of the apple tree
The housing condition is most acute;
There are raucous cries of discordancy
And lady birds stirring maternally
While the others engage in shrill dispute.

There's a whippoor-will with his G.I. Jill
There are wrens and an indigo bunting Joe,
There are doves who mourn for a domicile
While blue jays camp on the distant hill
For there's simply no place to go!

Oh, what can returning families do
To solve the problems of tenancy
When love is raising a hullabaloo,
When hearts are aflame and the day is new
But no vacant limbs on the apple tree?
—SYLVIA STORLA CLARKE, R.N.

A Doctor Defines Nursing

by William A. Brady, M.D.



Even at the risk of "knocking off some good subscribers" as R.N. was warned by Dr. Brady, we reprint his syndicated column which appeared in the Newark Sunday Call, and other papers, August 4, 1946. Although this column was written specifically for the general public, we believe the views expressed should interest nurses as well. What are your comments?—THE EDITORS.

FOR YEARS I HAVE ADVOCATED a two-years' course of hospital training for nurses—trainee nurses, graduate nurses, registered nurses, top notchers in private practice or in institutional service. My advocacy of such reasonable preparation mildly pleased some young women who were being exploited by the hospitals—the third year of the so-called study and training most nurse training schools require is nothing but a wicked scheme by which the hospital gets a year of qualified professional nursing service out of the poor suckers for a fraction of what their service is worth.

But I do not recall that any number, group, or organization of nurses, pupil nurses, or prospective pupils or students of nursing, or any graduates of the three-year racket, spoke above a whisper in support of this agitation. I do recall a good many typically smug communications re-

ceived from hoity-toity beneficiaries of the racket, to whose attention, it seems, some one is always bringing these small matters.

I divide all nurses into categories, that is, all but the loveliest one that ever lived, who came to work for me when I was an honest country doctor and has kept me working—I mean she has kept working for me ever since. The other nurses come in the following categories.

1. REGISTERED NURSES. These are nurses who have completed a course in a recognized nurse training school and passed the State Nursing Board examination which gives them the right to sign Jane Doe, R.N.—and a registered nurse is a top notcher qualified without further foolerol for any position a nurse can fill. From the Army to the most pedantic Civil Service level the only reason for subjecting a duly accredited R.N. to any [Continued on page 92]



Slightly Anemic

Brown.





Greece Has a Word for These Nurses—'Sas Efchareesto'

by Heather Kilpatrick, S. R. N.

WHEN YOU HAVE TO LICK the Four Horsemen of the Apocalypse, which one do you try to unseat first? I think that was the problem that shook even the stoutest of heart among us. Where should we begin? Most of us were prepared to contend with destitution, dirt, and disease, but not for what we came upon in Greece: only an occasional house where whole villages had once stood; families huddled together in tiny shacks, built of odds and ends, and managing to survive—heaven knows how—the bitter winter. No food, no fuel, little hope, but they hung on. Everywhere, utter destitution and filth.

Perhaps it was the filth that appalled us most. Even the few, sorry little hospitals still in operation were vermin-infested. Conditions in Athens had been bad enough, but nothing like what we came upon in Lamia. The hospital there was an impromptu 80-bed affair housed in a three-story school building. Patients lay in bed completely dressed in whatever scraps of clothing they owned. There were few blankets. The military authorities were willing to supply us with some new ones,

As a Regional Nursing Consultant of U.N.R.R.A. in Greece, Miss Kilpatrick supervises all staff nurses who are helping the Greek Government to rehabilitate the health facilities of the country. Her region—one of eleven set up for administrative purposes—comprises the counties of Attica, Boetia, Phthiotis, Erytania, and Euboea. In this article, she highlights the program of the nurses by describing part of their work in Phthiotis and its county seat, Lamia, a city of some 20,000 population. Miss Kilpatrick is a Canadian R.N., whose home is Vancouver, B.C.

—THE EDITORS

but not until the vermin had been eliminated from the institution.

We didn't even have that priceless treasure, hot running water. Plumbing consisted of one cold water tap on each floor, and four lavatories. The water supply was turned on for only a short time each day, and we didn't have enough containers for adequate storage. Everything else was in short supply: drugs, food,

fuel, soap, linen, equipment of every sort. When there was to be an operation, we boiled our few precious instruments over an open fire on a balcony outside the operating room.

Supplies and equipment were on the way, we knew, so we turned our first attention to cleaning. I shall never forget the day we disinfested the hospital. To do the job, we had three U.N.R.R.A. nurses, the hospital staff of seven practical nurses, and four Greek Red Cross volunteers. Best of all, we had two portable disinfecting units, manned by hygiene personnel from the British Army.

Many of the Greek practical staff had never seen a patient washed in bed, had no idea of how it was done. So we put them to work stripping beds and sending the things to the steam disinfester, while we attended



the patients. Mattresses needed steaming in the worst way, too, but we couldn't spare them long enough to allow them to dry, so we compromised by dusting them thoroughly with AL-63. Walls and floors were well sprayed with a creosote solution.

Among the patients, it was scabies, scabies, scabies, for they hadn't seen soap or clean clothing for a long

time. Each was stripped and bathed, treated with ointment, wrapped in a clean new blanket, and returned to a clean bed. The wards were uneasy when we moved in with our soap, water, and disinfectants but after the first two or three patients had been put through the mill, the rest caught the spirit of the occasion and responded enthusiastically.

There was even a funny side to the procedure. As we stripped each patient, we tied his clothing into a bundle and sent it off to the steam disinfesters. But there—to achieve full capacity for each "charge"—someone untied the bundles and piled the clothes in indiscriminately. After that, there was only one thing to be done: When the great heap of sterilized clothing was returned to a ward we "auctioned" it off by holding it aloft, piece by piece, and inviting the owner to come and get it. That went on for hours.

"Operation Cleaning" accomplished, we had to face an even more vexing problem. We soon found that the few Greek doctors left in the area were completely ignorant of the new drugs, having been isolated from medical and scientific progress for four years. As a matter of fact, some of them were even unfamiliar with pharmaceuticals in general use before the war. So we nurses were put in the embarrassing position of having to teach them. We had to persuade them that a daily dose of 15 grains of a sulfa drug is ineffective; that the iron preparations in good supply were very useful tonics; that calcium gluconate is not

indispensable, and so on.

In time, drug distribution was taken over by local Greek Committees, but it was still up to us to see that the pharmaceuticals were being used, and being used properly. Some villages had no physicians, so it was arranged that any person could get such items as atabrine, aspirin, iodine, and dressings from a local official merely by signing for them. But occasionally a village president—hipped on the subject of rationing—would attempt to distribute drugs “fairly” among everybody, with the result that each villager might receive one atabrine tablet. It took a great deal of tact and persistence to convince



such officials that drugs must be distributed according to need, not ideology.

The Lamia institution is the “big hospital” of Phthiotis. Elsewhere in the county there are five little hospitals of from six to twenty beds; they have been functioning for vary-

ing lengths of time. Some others were set up during the civil war, but functioned for only a few weeks. Another, which continues in operation, was started by Americans who had entered Greece to assist in the resistance movement in the last months of the German occupation. Originally set up in the mountains, it was moved to a village on the one main road in the county after the Germans had departed. I say “village,” but actually the hospital took over the only house left standing; some 300 others had been burned by the enemy forces.

The owners of the house set up their home in the basement, while two Finnish huts were erected to serve as outpatient room and storehouse. The staff consisted of two doctors, a manager (a lawyer), who also acted as the only “nurse,” a cook, and a cleaner. That staff, in February of this year, managed to care for 26 patients, for a total of 257 patient-days, and for 1,250 outpatients, many of whom came miles for treatment.

Thus were Phthiotis’ 150,000 people served until U.N.R.R.A. came into the picture. Conditions are somewhat better now but much remains to be done. [Continued on page 98]

Young Modern

Whirlwind—earthquake—atom bomb;
Fist, and feet, and voice—that’s Tom.
Extra food and extra care:
Even extra diaper!

—MERLE PERRY, R.N.

Calling All Nurses

NURSES WHO WANT to locate friends whose addresses have been recently changed or become lost during the past few years may submit for publication, without charge, a short notice of about 75 words "calling" for information about any other registered nurse.

RUBY BARTHOLEMEW: "I've got those mad about him. sad about him, where am I without him blues." Corky and I haven't heard it sung so impressively since New Guinea. Could stand to hear it again. Ex-Capt. Alice R., 3 Sunderland Ave., Rutherford, N.J.

MARGARET BAILEY McCORMACK: Entered Army Nurse Corps at Fort McClellan, now discharged, and **MATILDA VATH DURREL, LOUISE SHIRLEY, VELMA WATSON, EVELYN DIAL, CAROLYN BURNETTE COMA,** last heard of at Army's Foster General Hospital, Jackson, Miss. Please communicate with Juanita Underwood, Lindside, West Va.

LT. DELLA URBA: Please communicate with Virginia Robinson Breyne, Box 1470, Route 11, Milwaukie 2, Ore.

GRADUATES OF KINGS COUNTY HOSPITAL SCHOOL OF NURSING: Next year we celebrate our 50th Anniversary and are trying to locate all our graduates. If you have not received your questionnaire, please write to Miss Anne Johnson, Chairman, 451 Clarkson Avenue, Brooklyn 3, N.Y.

1929-1932 GRADUATES, ST. LOUIS ALEXIAN BROTHEPS HOSPITAL: Please communicate with T. J. Schloff, Marathon, Iowa.

PROVIDENCE HOSPITAL, SEATTLE: Graduates of Class of 1926, a reunion is being planned. The date is still undecided. Those interested please get in touch with Bernice K. Hobbs at 1815 East 80th St., Seattle 5, Wash.

R.N. FANS: I have all the issues from June 1939 through December 1945 with the exception of October 1939. They are in excellent condition and I would be happy to send them to someone who would like to have them. Shirley Irene Hambidge, R.R. No. 10, Lafayette, Ind.

SAN JOAQUIN GENERAL GRADUATES: Will every graduate please send present name, address, and year of graduation? We hope to have a "Homecoming" next spring and want to locate all graduates. Please write to Ava White Huffman (Class of 1929) 20-16th St., Antioch, Calif., or Leolla Allen, c/o Outpatient Clinic, 245 E. Channel St., Stockton, Calif.

Chicago's foundlings find a welcome at St. Vincent's Infirmary. Here, nursing sisters and nuns like Sister Mary Alice, give loving care while teaching self reliance.



Nurs
affili
mont



Infants, learning to drink from glass, are fondly cuddled. Nurse makes up for missing mother.

Dormitories are combined dining and play rooms, where affiliating student nurses may learn well-baby care.

At three, no knot's too complex for untying! These children learn young to solve their own problems.



A
Salle
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St. V
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Nurses from five training schools affiliate at St. Vincent's for three months of pediatric experience.



Sister Gabriella, R.N., is in charge of the nursery where she supervises the care of her small charges.

R.N. Goes to St. Vincent's

by Anne M. Goodrich, R. N.

ALL ALONE ON A BENCH in the waiting room of Chicago's La Salle Street Station, a ten-day old infant is protesting the lack of attention to his creature comforts and the hunger which is paramount in his infant mind. The experienced police officer who picks him up knows that a welcome awaits him at St. Vincent's Infirmary and Maternity Hospital where loving and experienced hands will care for him.

The next day he lies contentedly in his crib, his identification card bearing the first name of Francis and the surname of the officer who found him. Experienced social workers are already piecing together his identity and attempting to locate the

desperate mother who left him. If it is possible to solve her problems, he may be restored to his own family. If not, after a stay at St. Vincent's he will probably find himself adopted into a suitable foster home.

Little Francis is but one of the 196 daily average of babies from birth to preschool age who find themselves being cared for by the Sisters of St. Vincent, the baby nurses whom they train, or students from one of the five hospital schools which affiliate with St. Vincent's for pediatrics instruction.

Established in 1881, this hospital, in addition to giving shelter to foundlings, maintains an active obstetrical de- [Continued on page 90]

Reviewing the News

Civvies

President Truman has granted authority permitting the off-duty wearing of civilian clothes to women service personnel as of September 20, 1946.

The Navy had previously issued an order last Spring permitting Navy nurses to wear civilian clothing when off duty. The order was, however, rescinded within a 24-hour period after it was issued. Civilian Production Administration had complained that the additional number of women trying to buy from depleted clothing stocks would cause a shortage and undue hardship. The C.P.A. has now stated that they have no objection to civilian clothing for women in war services because of the small number involved. The total women's strength in both Army and Navy is about 23,000 of which some 15,000 are nurses.

Wages and Hours

While the nursing shortage continues nationwide, New York City's Department of Hospitals has taken significant action toward making employment more attractive to nurses in the metropolitan area. Dr. M. Bernecker, Commissioner of Hospitals, has announced that nursing personnel in the city's hospitals would begin a 40-hour 5-day week on No-



vember 1. Estimating that the change in hours would cost the city five million dollars annually, Dr. Bernecker said that he hoped the city would be able to obtain the services of an additional 1,000 nurses immediately and that the reduction in the work schedule would attract former city nurses to return to duty in municipal hospitals.

At the same time, Mayor O'Dwyer of New York stated that he would ask the Board of Estimate to increase the starting pay of graduate nurses in city hospitals to \$2,400 a year. The increase represents a raise of \$300 over the present starting pay of nurses in municipal hospitals and will become effective November first. Other provisions call for 25 days annual vacation, 12 legal holidays and 12 days allowance for illness annually.

New Chief

The Veterans Administration has announced the appointment of Dorothy V. Wheeler, formerly executive secretary of the New York City Nursing Council, as director of nursing service in the Veterans Admin-

istration's Department of Medicine and Surgery.

Miss Wheeler, who took office on October 1, succeeds Miss Gwenn H. Andrew who was superintendent of V.A. nurses since January 1943 and acting director since the Department of Medicine and Surgery was set up in January 1946.

Miss Wheeler, a graduate of Washington University School of Nursing, has had varied experience as general duty nurse, head nurse and supervisor of medicine and surgery at the University Hospital in Columbus, Ohio, as nursing arts instructor at Meriden, Conn., and director of nursing in New York City. After a short period as nurse consultant in the National Nursing Council, she became executive secretary of New York City's Nursing Council and was concurrently nurse consultant in the U.S.E.S. from August to December 1945.

Miss Andrew, who joined the Veterans Administration staff in 1924, has been assigned as chief nurse at the Veterans Hospital, Wadsworth, Kansas.

G. I. Bill

A recent ruling by the Veterans Administration makes it possible for veterans who have completed a course of training or education under the G.I. Bill to take another course, even in an entirely unrelated field, provided they have sufficient time coming to them under the Bill to allow for completion of the new course. Veterans wishing to take new



courses must ask for a special letter of authorization from the Veterans Administration.

The V.A. has also ruled that all "required" purchases of veteran students, including athletic activity tickets, yearbooks, and health benefits, will be paid for by the V.A. if such purchases are compulsory for all students.

Veterans carrying jobs while taking courses under the G.I. Bill, will receive from their school a form on which to report their expected earnings from this employment. These forms must be filled out and returned to the V.A. promptly, as a delay may result in suspension of subsistence payments.

Veterans are entitled under the G.I. Bill to a period of training or education equal to the time spent in service plus 12 months.

Philanthropy

Expansion of the Department of Nursing Education of the University of Pennsylvania came recently with the announcement that the W. K. Kellogg Foundation of Battle Creek, Michigan, has agreed to give the

University the sum of \$60,000 for the expansion of the University's program in nursing education. The University expects to use the funds to increase its facilities for field experience in public health nursing and for teaching and supervisory experience in hospitals. It is also planned to carry the training in clinical maternity nursing to a more advanced level.

The American Public Health Association, through a grant from the Lasker Foundation, will offer annual awards in the field of medical research and public health administration. Three awards of \$1,000 each will be given for outstanding research contributions, while an additional award of \$1,000 will be made for an outstanding contribution in public health administration. A special award of \$2,500 will be given for unusually outstanding contribution in either field.

Recall

Following authorization by the War Department of a recall quota of 1,000 nurses, the Surgeon General's Office has reported late in September that 250 nurses have returned to active duty in the A.N.C. but 750 more vacancies must be filled before November 30 to prevent a shortage.

It is estimated that about 75,000 soldier patients are still in Army hospitals throughout the world and the additional nurses are needed to give them adequate care. Nurses wishing to return to duty with the A.N.C.

may sign up for 24 months or for an unlimited length of time. They will hold the rank they held immediately preceding their separation from the service.

Nurses returning to the Army may be interested in the new order defining normal overseas tour of duty for women personnel as two years except in Nome and the Aleutian Islands, Greenland and Iceland, where the normal tour of duty has been set at 18 months. Nurses and other women having completed their normal tour of duty may request a three months' extension of foreign service, but no extension beyond three months will be granted and the maximum foreign service tour including extensions is set at 27 months.

I.C.N.

Miss Anna Schwartzberg, executive secretary of the International Council of Nurses, announced during the Biennial Convention that the I.C.N. will hold its first postwar meeting in May 1947, in Atlantic City. The I.C.N. expects between 14 and 15 thousand nurses to attend from all parts of the world.

Nurses' Memorials

As a preliminary to the nationwide fund drive to raise two million dollars to construct, equip, and endow a nurses' national memorial in Washington, a county fair was held at Walter Reed Hospital Army Medical Center in Washington which cleared

"Nurse...seein' double?"

C'mon—

*double-
check*

**benefits
below"**



✓ **PROVEN** aid against skin infections

The highly successful record of Mennen Antiseptic Baby Oil in helping to prevent skin infections on *millions* of babies over the past 12 years—*cannot be matched by any other baby oil or lotion*. Your recommendation of Mennen is backed by *proved* results in keeping baby's skin healthier.

✓ **Best SHIELD** against urine irritation

A continuous, unbroken film of Mennen Antiseptic Baby Oil forms a solid barrier of protection, provides *thorough* coverage of the diaper area. It is a stable, homogenous mixture which *does not break down* and is *not subject to evaporation or chemical alteration* on the delicate infant skin.

FREE...send for bottle

MENNEN

ANTISEPTIC BABY OIL

Most baby specialists also prefer
MENNEN ANTISEPTIC BABY POWDER

The Mennen Company, Newark 4, N. J.

Send me bottle of Mennen Antiseptic Baby Oil. (Offer expires Dec. 1, 1946)

NURSE.....

ADDRESS.....

RNO

DESITIN OINTMENT

PIONEER IN THE FIELD OF

EXTERNAL COD-LIVER OIL THERAPY

USED EFFECTIVELY IN THE TREATMENT OF
Wounds, Burns, Ulcers, especially of the Leg, Intertrigo,
Eczema, Tropical Ulcer, also in the Care of Infants.

Desitin Ointment contains Cod-Liver Oil, Zinc Oxide, Petrolatum, Lanum and Talcum. The Cod-Liver Oil, subjected to a special treatment which produces *stabilization* of the Vitamins A and D and of the unsaturated fatty acids, forms the active constituent of the Desitin Preparations. The first among cod-liver oil products to possess unlimited keeping qualities, Desitin, in its various combinations, has rapidly gained prominence in all parts of the globe.

Desitin Ointment is absolutely non-irritant; it acts as an anti-phlogistic, allays pain and itching; it stimulates granulation, favors epithelialisation and smooth cicatrisation. Under a Desitin dressing, necrotic tissue is quickly cast off; the dressing does not adhere to the wound and may therefore be changed without causing pain and without interfering with granulations already formed; it is not liquefied by the heat of the body nor in any way decomposed by wound secretions, urine, exudation or excrements.

DESITIN POWDER

Indications: Minor Burns, Exanthema, Dermatitis, Care of Infants, Care of the Feet, Massage and Sport purposes.

Desitin Powder is saturated with cod-liver oil and does not therefore deprive the skin of its natural fat as dusting powders commonly do. Desitin Powder contains Cod-Liver Oil, (with the maximum amounts of Vitamins and unsaturated fatty acids) Zinc Oxide and Talcum.

Professional literature and samples for Physicians' trial will be gladly sent upon request.



Sole Manufacturer and Distributor in U. S. A.

DESITIN CHEMICAL COMPANY

70 SHIP STREET • PROVIDENCE • RHODE ISLAND

My Little Girl Eats Them Like

Candy

says a New York Physician

A 6 gr. sodium bicarbonate tablet so palatable no patient knows what it is or objects to its taste. Send coupon for sample.



Carbex Bell is made entirely of sodium bicarbonate and aromatics because our doctors tell us that sodium bicarbonate properly used is the fastest-acting and most dependable relief known for the symptoms of indigestion.

"Trial is Proof"

THE CANDY-TASTING ALKALIZER

SEND FOR SAMPLE

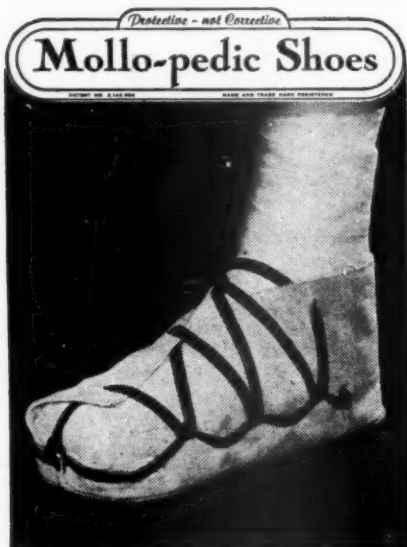
RN-10-46

HOLLINGS-SMITH CO.
Orangeburg, N. Y.

Sample Carbex Bell, please.

Name R.N.

Address



PROTECTION FOR INJURED OR AILING FEET

Mollo-pedic Shoes are designed specifically to protect and support the injured, ailing or cast-bound foot; to replace hard, unyielding shoes and give the patient confidence and non-slipping, cushioned comfort in his efforts to walk.

Mollo-pedic Shoes are also exceptionally helpful in general recuperative cases, when the patient is re-learning to walk and hesitant of gait.

Soles of Mollo-pedic Shoes are of thick, resilient, sponge rubber. Uppers are fashioned of soft, strong, pliant, genuine Osnaburg fabric. Patented lacing method permits adjustment to any shaped dressing or cast to avoid pressure on tender spots.

Available at leading Surgical Supply Dealers.

Manufactured by
DETROIT FIRST-AID CO.
DETROIT, MICH.

over \$10,000 in two days.

It is planned to use about half of the two million dollars to pay for the construction of the building, while the remainder will provide an endowment fund to reduce the cost of services to medical women who use the memorial. Service nurses will be asked to pay annual dues of \$12 a year if they live within 100 miles of Washington and \$1 a year if they live elsewhere. The approved designs for the memorial, plan for the accommodation of 300 persons in three residence halls and will be capable of enlargement.

A war memorial for nurses of the British Empire will be erected in a chapel in Westminster Abbey and will house a Roll of Honor of nurses who gave their lives in World War II. A drive for \$80,000 was launched by the magazine, *Nursing Mirror*, in January. Twenty thousand dollars has already been raised to furnish the chapel while the additional \$60,000 is to form a fund to benefit the nursing and midwifery professions in a way to be decided later.

Military P.G.'s

In addition to 25 Army nurses who are finishing a postgraduate course in neuropsychiatric nursing at Brooke Medical Center, 25 more Army nurses have been enrolled in civilian educational institutions for postgraduate work in nursing specialties. Sixteen are taking the year's course in nursing education at the University of California and at Teacher's College, New York. Five

Have YOU heard what they say about YODORA?



THEY SAY: "It's a gentler cream deodorant . . . yet it gives lasting protection." (Yodora is made on a *face cream base*. Spreads on as easily, too.)



THEY SAY: "It's lovely . . . like a fine cosmetic." (Yodora *stays* creamy and soft. Never gets dry and grainy. It's delicately scented. No druggy odor!)



THEY SAY: "It's so *soothing!*" (Yodora contains no irritating metallic salts . . . it's actually soothing to normal skin. Can be used immediately after shaving.)



THEY SAY: "It won't harm fabrics." (Yodora has been pronounced chemically harmless to fabrics, by The Better Fabrics Testing Bureau.)

YODORA CREAM DEODORANT



ADVERTISED
IN
AMERICAN
MEDICAL
ASSOCIATION
PUBLICATIONS

"checks perspiration odor the SOOTHINGEST way"



McKesson & Robbins, Inc.
Bridgeport, Conn.

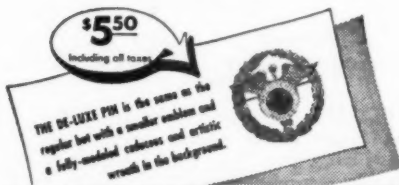


**WEAR THIS
R. N. INSIGNIA
WITH PRIDE!**



There is only *one* national emblem for all R. N.'s just as there is only one national flag for all 48 states. This emblem identifies you as an R. N. *anywhere*. Illustrated are the Regular and the DeLuxe pins. They are truly beautiful because master-jewelers designed and made them. The emblem is gold-plated sterling silver with baked-enamel blue cross on etched-gold background. Both pins have positive clasps. We never seem to have enough, so, order now!

It is unlawful for any person other than a Registered Professional Nurse to wear these pins.



R. N. SPECIALTY COMPANY

15 East 22nd Street, New York 10, N. Y.

Gentlemen:

Please send me

☐ Regular pin at \$2.50

☐ DeLuxe pin at \$5.50

Check or money order enclosed.
No C. O. D's.

Name.....

Address.....

Registry Number.....

are studying operating room techniques and management at Cornell and Baylor Universities, and four are taking courses in anesthesia at hospitals in Philadelphia, Cleveland, and Baltimore.

At the same time, the Navy is planning to send a second contingent of ten nurses to the Pennsylvania Hospital in Philadelphia for a four months' course in psychiatric nursing. Eighteen Navy nurses are to be assigned for a twelve months' course in physical therapy at the Virginia Medical College, and ten members are going to Teacher's College for a nine months' course in teaching and ward administration. Two groups of 18 Navy nurses each are being assigned to Boston and Philadelphia schools of occupational therapy to take the first course of its kind to be offered Navy nurses.

The Navy nurses whose applications for postgraduate study have been approved include one or more lieutenant commanders, several lieutenants, and lieutenants, j.g. in each group. The Army has announced requirements for postgraduate study as follows: Those who wish to take a course in psychiatric nursing may be

NURSES' CAPS COLLECTORS: In my 15 years of nursing experience with the Indian Service, Army Nurse Corps, and in private duty, I have collected many different nurses' caps as a hobby. Will R.N.'s readers help me add to my collection. (Mrs.) Hazel Carlson, U.S. Indian Agency, Cherokee, N.C.



IN GERIATRICS...
(CARE OF AGED)

SOAK—Soak 15 minutes in solution (or overnight) — (1 glass water to capful of Polident)



RINSE—Hold under running water to rinse — **THAT'S ALL**

Whenever denture care is your problem . . .

When your elderly patient is tucked in for the night, are you sometimes left "holding the bag" with a set of soiled false dentures that need cleaning and safe keeping? • Just immerse them in **POLIDENT** solution, made with a capful of **POLIDENT** powder in a glass of water. Without the necessity for brushing, **POLIDENT** safely dissolves mucin, tarnish and food debris in a matter of minutes. Thus it soaks dentures clean, and eliminates the dangers of brushing and excessive handling. • After you've tried **POLIDENT** once, you'll undoubtedly want to recommend it to your patients too for use after they leave the hospital. • Please use the coupon to secure a sample.

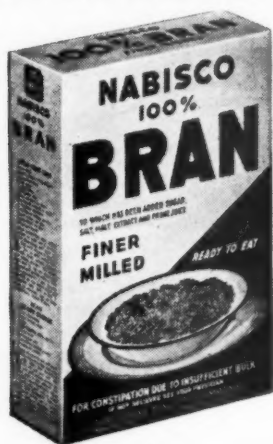
HUDSON PRODUCTS, INC., 8 HIGH STREET, JERSEY CITY 6, N. J.

think of **POLIDENT**

Brushless cleanser of bridges and dentures

HUDSON PRODUCTS, INC. D-106
8 High Street, Jersey City 6, N. J.
Please send me a professional sample of **POLIDENT**.

Name _____ R.N.
Hospital _____
Address _____
City _____ State _____



DIET-BULK

plus 3 important
nutrients

To aid in counteracting constipation due to insufficient bulk—you'll find patients enjoy a dish of crisp, crunchy Nabisco 100% Bran at breakfast.

Containing the nutritive factors of whole bran—including important iron, phosphorus and Vitamin B₁—Nabisco 100% Bran is finer-milled to make bran particles smaller, "easier" on the patient. Mild and gentle in action.

Sold in pound and half-pound packages at food-stores. Physician's sample for you on request.

finer-milled
TO MAKE BRAN PARTICLES SMALLER



**BAKED BY NABISCO
NATIONAL BISCUIT COMPANY**
444 W. 15th St., New York 11, N. Y.

in Category I or be Regular Army nurses. Students of anesthesiology must be regular Army nurses with a 35 efficiency rating and preferably graduates of the Army's anesthesiology course. The operating room technique course is open to Regular Army nurses with efficiency index of 35 or higher who have had a minimum of four months' experience in surgery since graduation from training, while the applicants for nursing education courses must be Regulars with at least two years of college.

What They Said

[Continued from page 41]

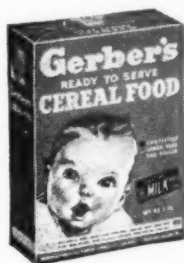
stature until your schools have a separate identity as educational institutions. The present system places the student education in competition with the needs of a hospital. Until the two are separated administratively and financially, neither the best education nor the best service can be achieved.



THURMAN B. RICE, M.D., INDIANA STATE BOARD OF HEALTH, AT SEPTEMBER 23 EVENING SESSION. TITLE: "WHAT THE WORLD NEEDS TODAY."

The professions of wifehood and motherhood, teaching and nursing, are the poorest paid of any of the professions. Is it not characteristic of a very sick world that it should think only in terms of dollars and cents? It is because a masculine world puts greater stress upon the aggressive aspects of life and war, than upon the conservative. The masculine world

NOW REAL VARIETY IN BABY CEREALS



NEW
PRODUCT

Three cereals different in taste — alike in high nutrition values

With the addition of the new Barley Cereal, Gerber's now offer three special cereals for babies.

These three cereals, Cereal Food (blue box) Strained Oatmeal (red box) and Barley Cereal (yellow box) have distinct differences in taste according to the grains from which they are made. All three meet the latest medical recommendations for infant nutrition.

For instance, each is rich in added B complex vitamins derived from a dried, specially grown primary yeast. Added iron, calcium, and phosphorus are provided in generous measure in all three cereals. Fine straining makes for easy digestion by infants as young as one month old. All three cereals are pre-cooked, ready to serve.

Professional Reference Cards and samples of the three
Gerber's Cereals will be sent on request. Use coupon below.



GERBER PRODUCTS COMPANY
Dept. 3510-6, Fremont, Michigan

Gentlemen: Kindly send me complimentary
samples of Gerber's Barley Cereal as well as
samples of Gerber's Cereal Food and Gerber's
Strained Oatmeal and Professional Reference
Cards.

Name.....

Address.....

City.....State.....

has been wrong—it has been very wrong. The time has come when we must save and make whole, rather than spend and destroy.

☆

LUCILE PETRY, U.S. PUBLIC HEALTH SERVICE, AT SEPTEMBER 25 AFTER-NOON SESSION. "THE PREPARED PRACTICAL NURSE."

Practical nurses who have had a program of training varying from nine to twelve months in length should, upon graduation, be ready to take their places on the hospital nursing staff. There they should be able to give elementary care to medical, surgical, obstetrical, and pediatric patients. They should be trained, also, to serve in homes under the supervision of public health nurses. They should be able to give care to

patients with chronic illnesses, to the convalescing and to the aged in hospitals and homes with somewhat less supervision than in acute hospitals.

A uniform course of instruction should be offered, leading to licensure. For added effectiveness, a national standard of education and licensing should be adopted.

☆

PAUL J. MUNDIE, PH.D., INDUSTRIAL PSYCHOLOGIST, MILWAUKEE, WIS., AT SEPTEMBER 23 EVENING SESSION. "THE LAYMAN'S VIEW OF NURSING."

The nurse must be recognized as a professional person even more than is now the case. The nurse must stand before the public in all the glory of her profession; she must stand beside the doctor as an equal in professional dignity. To do these

*Warner's**



CHAFÈZE*

PREVENTS CHAFING

Chafeze*, the soft jersey shield originated by Warner's, has proved a boon to active women. Worn next to the skin, either under a girdle or by itself, Chafeze* prevents painful chafing. It launders perfectly like any lingerie.

Sold Only in Corset Departments

Ask for Chafeze* by name
\$1.25—Large size, \$1.50

*REG. U. S. PAT. OFF.

Remove
Dandruff

...This fast
...easy way!



Here's the method:



1. **APPLY FITCH'S** to the hair and scalp, before adding water, and massage. This enables the shampoo to dissolve the dandruff completely.



2. **ADD WATER** gradually, continuing the massage. Abundant lather forms to carry away the dissolved dandruff flakes.



3. **RINSE WELL.** Fitch's is entirely soluble in water, so it leaves hair sparkling clean, lustrous, and completely dandruff-free.

Fitch is the only shampoo made whose guarantee to remove dandruff is backed by one of the world's largest insurance firms.



***Fitch's* DANDRUFF REMOVER SHAMPOO**

THE F. W. FITCH COMPANY—Des Moines 6, Iowa—Bayonne, N. J.
Jackson, Mississippi—Los Angeles 21, Calif.—Toronto 2, Canada

New! LIQUID LIPSTICK



Liquid Liptone

The first and only 'lipstick' that really stays on!

Yes, beautiful lips from starting time to quitting time, with no retouching after the first make-up. Princess Pat Liquid Liptone does it—the one and only lip make-up that won't rub off on anything or anyone—that takes up none of your precious minutes. Choice of twelve shades—all new and "extra something"! Regular size bottle at all better stores \$1



Mail Coupon for Generous Trial Sizes

PRINCESS PAT, Dept. 620C
2709 South Wells St., Chicago 16, ILL.

Send Trial Sizes. I enclose 12¢ (3¢ Fed. tax) for each.

Check shades wanted:

- ☐ English Tint—delicate coral, not conspicuous.
- ☐ Parisian—lovely with dark hair, fair skin.
- ☐ Medium—natural true red—flattering to all.
- ☐ Tropic—sunny red, for titian and auburn types.
- ☐ Gypsy—harmony for dark eyes, olive skin.
- ☐ Regal—charming with dark eyes, medium skin.

Name _____

Street _____

City _____ State _____

things she must be extremely competent. Therefore, it seems obvious that the trend toward improved and higher standards of education will continue.

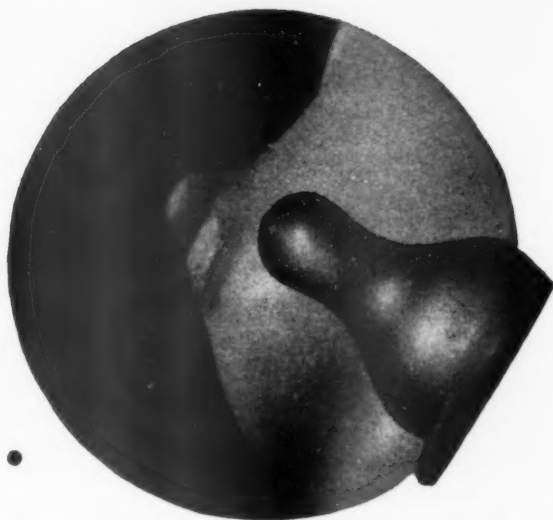
The overwhelming demand for nurses during the war . . . led to a renewed emphasis on the practical nurse. To the layman, it seems that there is going to be a permanent place for a person with less training than that given the registered nurse. But it seems that two aspects of this problem merit the greatest consideration. The term PRACTICAL NURSE is a bad term. The concept NURSE must mean the technically-trained registered nurse.



DR. HOWARD A. RUSK, ASSOCIATE EDITOR, NEW YORK TIMES, AT SEPTEMBER 26 MORNING SESSION. "THE DISABLED: LIABILITY OR ASSET?"

One of the greatest problems in rehabilitation is that of motivation—encouraging and convincing the disabled that they can rehabilitate themselves. This motivation, to be most effective, must begin at the earliest possible moment following the accident or illness. The nurse can be of inestimable value in providing this much-needed motivation, but she must know the facts about what can be accomplished with rehabilitation and selective placement of the handicapped. As in all phases of good nursing care, the nurse is the closest liaison between the doctor and the patient. She is the one who so frequently helps interpret to the patient, in words he can understand, the nature and extent of his disability.

NEXT BEST!...



Breast feeding usually is best, of course. And when a baby is put on the bottle the rubber nipple used should induce the conditions of breast feeding as closely as possible. The Davol "Anti-Colic" brand "Sani-Tab" nipple does this in three ways:

1. DESIGN

The tip of the "Anti-Colic" brand nipple is short; it has a firm, reinforced sloping shoulder similar to the areola of the lactating breast.

2. ACTION

It induces the same sucking action the infant uses at the maternal breast. This provides for the proper development of the muscles of the baby's mouth, jaw and dental arches.

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It provides for the full, natural, 20 minutes of essential sucking action at each feeding.

Have you a copy of "Bottle Feeding in Relation to Infantile Colic and Malformation of the Mouth"? If not, why not send for your copy.




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For many decades, physicians have relied upon HVC as a trustworthy antispasmodic and sedative. A constantly increasing number of physicians prescribe HVC for business women whose routine calls for an active day, every day.

HVC acts to relieve smooth muscle spasms. Frequently given as a general antispasmodic. Very widely prescribed for dysmenorrhea, menorrhagia and metrorrhagia. Non toxic and non laxative.

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ity. She must know something of the industrial hazards of what the future holds for him and what specific jobs he must do. She must have a working knowledge of the physical capacities of the cardiac, the deaf, the blind, the orthopedically handicapped, the speech defect, or the person with arrested tuberculosis. She should know something of the rehabilitation for the person disabled as a result of an industrial, home, farm, or automobile accident. Postgraduate training, in-service training, and visits to rehabilitation centers can give the public health nurse the tools with which she can help build increased opportunity for the handicapped.



RUTH SLEEPER, PRESIDENT OF THE NATIONAL LEAGUE OF NURSING EDUCATION, AT THE SEPTEMBER 26 MORNING SESSION. "WHO SHALL PAY FOR NURSING EDUCATION?"

While a movement to set up schools of nursing in connection with universities and colleges is well under way, 91 per cent of all schools are still operated by hospitals.

An interesting analogy exists between the teaching and nursing professions. Both groups render an essential human service, and both groups are made up largely of women. There are over a million teachers in the United States as compared with an estimated half million who nurse the sick for hire. The figure includes practical as well as professional nurses.

About half the million teachers are educated in tax-supported institutions, whereas only a negligible

RELIEF in **TORTICOLLIS**

The value of MINIT-RUB as an effective counterirritant has been demonstrated in many cases of torticollis.

Recent pharmacologic studies show that counterirritants not only increase the local blood supply through reflex action but tend to modify internal pathology by affecting trophic or vasomotor nerves supplying remote tissues.

Through the comforting and warming influence of counterirritation, MINIT-RUB helps bring relief to

taut muscles of torticollis, and aids in the recuperative process. Supplementary home-massage with MINIT-RUB between office visits is also of proven value. This makes the patient feel easier—more responsive to treatment.

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portion of nurses receive their preparation at public expense. And even the nurses educated in tax-supported schools of nursing pay their way to great extent by the service they render in care of the sick while they are students.



LUCILE PETRY, U.S. PUBLIC HEALTH SERVICE, ON "COMMUNITY NURSING," AT SEPTEMBER 25 EVENING SESSION.

To face expanding medical and scientific horizons, our entire understanding of nursing service will need to be widened and deepened. The nurse of the future will be part of a team, working with the researcher, doctor, practical nurse, institutional administrator, health officer, hospital adviser, secretary, and housekeeper. Together, this team will have as its ultimate goal the best possible care of the whole patient.

Some unification of effort is exemplified by the hospital which will be the community health center, perhaps housing the official health department and its nurses. Private physicians' offices will bring well people to clinics there, as well as sick people for hospitalization. Thus, every nurse will be working for the health of the general public.



AGNES GELINAS, DIRECTOR, SKIDMORE COLLEGE SCHOOL OF NURSING, AT SEPTEMBER 26 EVENING SESSION. "WHO SHALL PAY FOR NURSING EDUCATION?"

Nursing is essential to the health of the nation, yet the education of nurses has been left largely to private institutions. These schools have never

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1. J.A.M.A. 122:909 (July 31) 1943

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TWA Hostess Elsie Corbett is shown feeding a baby in flight with an Evenflo Nurser. Other air lines, too, have these modern, easy-to-use Evenflo Nursers in their baby kits to make travel convenient for mothers with babies. Quite often mothers prepare their own formulas, then fill and seal enough Evenflo Nursers for the entire trip. Thus on trains, planes or buses, they are ready for feeding simply by placing the nipple upright.

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*Evenflo air valves
relieve vacuum,
prevent collapse.*



prepared enough qualified nurses to provide adequate nursing care for all the people of the United States. With the public demand for unprecedented numbers of nurses, brought about by the extension of public hospitals and health services, a large increase in the use of taxation is needed to support public schools of nursing.

Publicly-controlled colleges and universities must prepare more, better qualified nurses. The federal Government must set up a system of nationwide scholarships which will provide the well-qualified candidate, who is economically handicapped, with sufficient funds to study in the accredited school of nursing of choice.

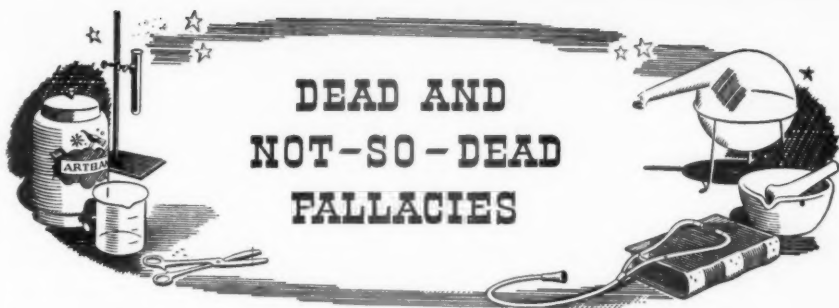
Stigma of Leprosy

[Continued from page 46]

swamps of Louisiana. It is along the Gulf Coast and the Mississippi watershed that you find the endemic regions of Hansen's disease in the United States. Here, in a climate conducive to the growth and spread of the disease, it stands to reason that there is greater difficulty of a cure, and the debilitating effect of the moist heat on the patients is depressing."

Mrs. Hornbostel has spent much of her life in the islands of the Pacific, and the places she mentions in the following section of her letter will be all too familiar to nurses who served in the Pacific Ocean Areas with the Army Nurse Corps:

"I was born on Guam, and went to Saipan when I was ten years old,



Once-trusted "cure" for asthma:
An ash tree of about the same age as the patient was selected, and the patient led to it at midnight in moonlight. A nail was driven into the tree through the patient's braided hair, which was then cut off.



A fallacy that flourishes today is:
Canned foods are made unwholesome by freezing. This has no foundation in fact. True, some foods may be changed in appearance by freezing. But their nutritive value is not affected.



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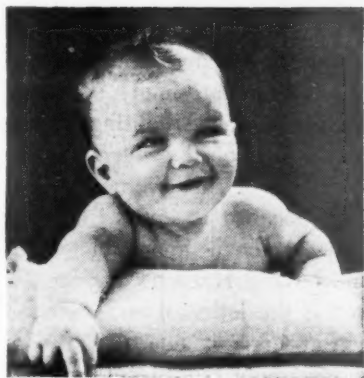
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and lived there several months in the Talofofo Valley, later moving into Garapan. My father had a coconut plantation at Charan Kanoa. This I believe is now an airfield*. A ship used to stop there only once every six months with supplies and mail. We were there until 1904, when we returned to Guam. I was married on Guam, and two of my children were born there. One of my brothers and my mother are buried in Guam's Naval cemetery. My father started the Agricultural Experiment Station on Guam, and introduced many new fruits, vegetables, and trees to the island.

"In 1928 we went to the Philippines, and were there when the war caught us. We were interned in Santo Tomas. My husband, fighting on Bataan, and taken prisoner by the Japs, was sent on the Death March. We all lived through it, and are in pretty good health—husband, three children, son-in-law, and my grandson, aged six now, except for me. I came out with this disease, and both my husband and I had beri-beri from malnutrition.

"I am certain that within a few years some of the boys who served in the Pacific and in the Orient during this war will come down with Hansen's disease. It is my firm belief that they will have acquired it, not through personal contact with others having the disease, but through

*Mrs. Hornbostel is mistaken. The B-29 airfield on Saipan is at the old Japanese Aslito airfield overlooking Magicienne Bay, and Charan Kanoa became the headquarters of Naval Civil Affairs, where the native Chamorros and Japanese have been rehabilitated.



When a baby oil is indicated



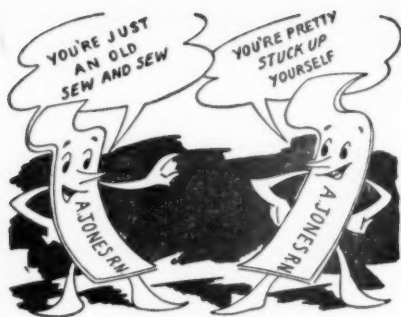
• Johnson's Baby Oil has been specially compounded to meet the exacting qualifications of the medical profession.

It is a blend of medicinal-grade mineral oils, carefully selected for purity and low viscosity. Soothing lanolin is added.

Johnson's Baby Oil is nontoxic and nonirritating. The clean fragrance is Johnson's special "Baby Bouquet," which has been extensively patch-tested and proved to agree with normal baby skin.

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Clothing of all types is hard to get and expensive. Attach name tapes to all your belongings for easy identification. Professional, boil-proof name tapes are color-fast, neat, and inconspicuous. They are done on fine-quality $\frac{7}{16}$ inch white cloth tape. **TWO STYLES.** One to be sewed on to your garments... the other to be stuck on by pressing with a hot iron. All tapes are made with your name or initials in red, blue, or black. Use name tapes and save dollars, worry, and losses.

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Gentlemen:

Please send me dozen name tapes, style as checked:

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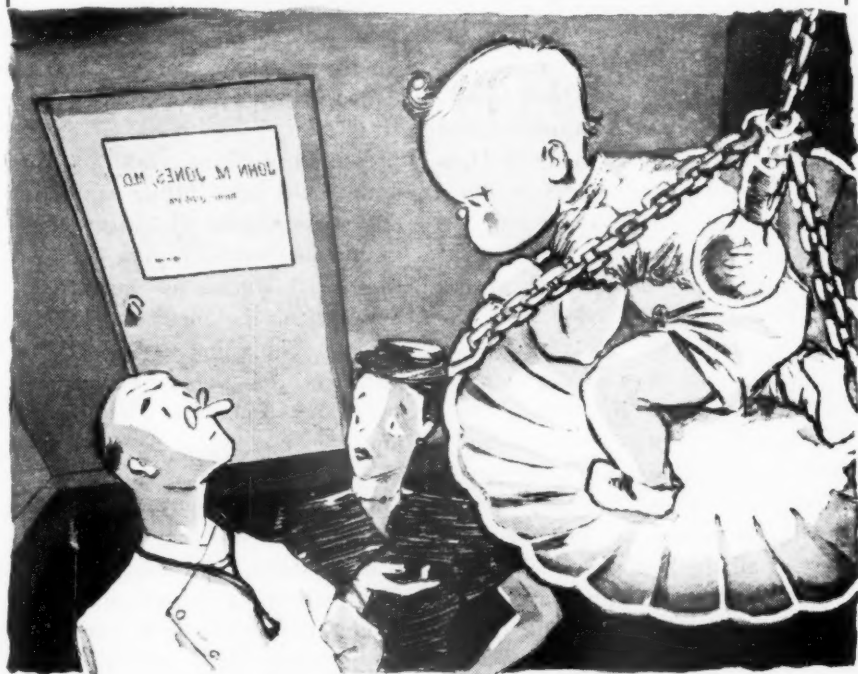
R. N. S. 10-46

insects who may be carriers, such as flies, bedbugs and ticks (of which latter there are many varieties, large and almost infinitesimal), or from constant living and fighting in the mud and filth of the rivers, creeks and swamps of the Tropics. I suggest this because, so far as I know, I have never been in contact with anyone having Hansen's disease."

Such is the letter of an American woman at Carville, heartsick at separation from her family, yet with her fellow patients carrying on the fight against Leprophobia from behind barbed wire. These patients abhor sympathy, asking only understanding and fairness. They want recognition of Hansen's disease as meriting the same scientific study and research as other difficult medical problems.

The great hope in the hearts of those at Carville today is the effect of the new drugs being used there in the treatment of Hansen's disease. Can they go out into the world, their disease arrested or even cured, and not be followed about by superstition and fear? Several patients discharged from Carville have returned voluntarily, because they were unable to keep jobs and live normal lives once it was discovered that they had been under treatment for Hansen's disease. At the present time, there are thirteen veterans of World War II at Carville, and present indications are that their number will increase. No one knows when, where, or how they were exposed to the disease or whether war service in tropical areas might be a contributing factor. [Turn the page]

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Practically *everyone* knows today that Cutter D-P-T offers three distinct advantages in protecting against diphtheria, pertussis and tetanus.

1. Pertussis organisms in D-P-T are grown on *human blood media*. Each cc. contains 40 billion such organisms, all proved Phase I.
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3. Extremely high pertussis count, together with purified toxoids, yields a vaccine so concentrated that your dosage schedule with D-P-T is only 0.5 cc., 1 cc., 1 cc. And protection is at least as great as when each antigen is given alone.

Even more effective is D-P-T (Alhydrox). It presents less pain on injection than alum precipitated vaccines and also establishes better immunity levels. Persistent nodules and sterile abscesses are rare, rather than an expected contingency.

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Streptomycin, which Mrs. Hornbostel mentions in her letter, is an antibiotic, first produced by Dr. Selman A. Waksman from cultures of *Streptomyces griseus*, and has been found successful in preventing the growth in culture tubes of the acid fast tubercle bacillus, which is very closely related to *Mycobacterium Lepae*, the causative agent of Hansen's disease. *Streptomyces griseus* is a common inhabitant of the soil, and is one of the agents responsible for the purification of the soil. It has the pleasant earthy odor of newly turned ground.

Promin and diasone are sulfonamide derivatives. In 1944, before the use of streptomycin was introduced at Carville, Dr. G. H. Faget, Medical Officer-in-Charge, stated:

"In our experience, promin is the best of all the sulfonamides, including sulfanilamide, sulfathiazole, sulfapyradine, and sulfadiazine, which have been used in the treatment of leprosy at the National Leprosarium. It can be regarded as the most encouraging experimental treatment ever undertaken here."

Chaulmoogra Oil, which you and

I learned as a specific drug for leprosy in our Materia Medica classes, is outdated and no longer in use.

The patients at the U.S. Marine Hospital in Carville publish a monthly magazine, called *The Star*, which for the past four years has been endeavoring to overcome leprophobia. It is one of the most intelligently presented publications of its kind, and would be a fitting addition to any nurse's library. It carries articles by medical men of repute, discussing the social stigma as much, if not more than, the medical aspects of leprosy. The editor and all the staff members are patients, and their viewpoint and discussions are interesting and revealing.

We, as nurses, should take our place beside some of our leading physicians in helping to dispel the fear, hysteria, and hopelessness in the minds of our patients and people. That this problem is at last coming up for nationwide scrutiny is evidenced in a recent *Star* editorial:

"In the offing is a picture layout with complete text on the Leprosarium in *Life* magazine, and 'The March of Time' is considering Car-

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ville as a subject."

Here are some further surprising facts on Hansen's disease:

The transmission of Hansen's disease still being unsolved, the medical world classed it as "feebly communicable."

The leprosarium at Carville was founded 52 years ago. To date not a single member of the medical or nursing staff has contracted the disease.

Doctors and nurses take very simple precautions, not comparable with those they would take in dealing with diphtheria, typhoid, and other communicable diseases.

Visitors are admitted freely, nor are they required to take any special precautions.

Patients are permitted to visit their homes semi-annually for short periods.

The battle of valiant doctors and patients against ignorance and fear has been fought before. You will remember how the word "tuberculosis" was substituted for the horrible word "consumption," and the great campaign to drag the skeleton of syphilis out of the closet. And yet, neither of these diseases, whispered about with reluctance and dread as they were, have inspired the loathing and repulsion that leprosy has inspired in the hearts of men, even though it is estimated that an early diagnosis, coupled with modern treatment, allows some patients to be discharged in two to four years.

Words and phrases we read have distinct emotional appeal for us. In modern usage, the word "leper" has

*"Certainly you may
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Approved and used by many R.N.s as a gargle and spray to help soothe and heal irritated throat and nasal membranes.

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become greatly distorted, and has come to mean a person who is physically and morally loathsome. As a result of centuries of misunderstanding and prejudice, it has lost all of its logical meaning. Here is a revealing statement, quoted in the *Star*, showing the humiliation and defeat suffered by those with Hansen's disease from the pens of writers who probably never knew the anguish and indignation they stirred:

"In the deep South, where the racial question is a touchy subject, a Montgomery, Alabama, editorial writer (1944) states, 'These political lepers (referring to Southerners who believe in racial equality) are among us today and the best thing to do is to treat them as lepers in the Bible days were treated—allow them to be destroyed by their own disease.'

"Remember, You're No Leper," was the title of an article published in the *Bulletin of the American Society for the Control of Cancer* (January, 1944), in which the author urges cancer patients to seek early treatment.

"These are but two of many similar illustrations which could be given,

for we, like you, have heard over the air, and from the screen, and read in the press such expressions as: Economic Lepers, Social Lepers, Moral Leprosy, Japan as a leper among nations, Germany—the handshake of a leper, ad infinitum, ad nauseum."

It is almost incredible to think that in our country today there are patients who, because they are sick, must know the power of this ancient stigma, must feel the whiplash of scorn and loathing. And it is in fear of this stigma and its effect on their families that many of them enter Carville under assumed names, breaking family bonds and lifetime friendships.

While the great medical struggle of man against disease goes on, nurses must join the humanitarian efforts to rid our people of fears and phobias about leprosy by educating our patients, friends, and families to the truth about Hansen's disease.

The old nursing axiom, "Treat the patient as well as the disease," should be kept in mind here. If people are going to be ostracised socially because they happen to be ill, and

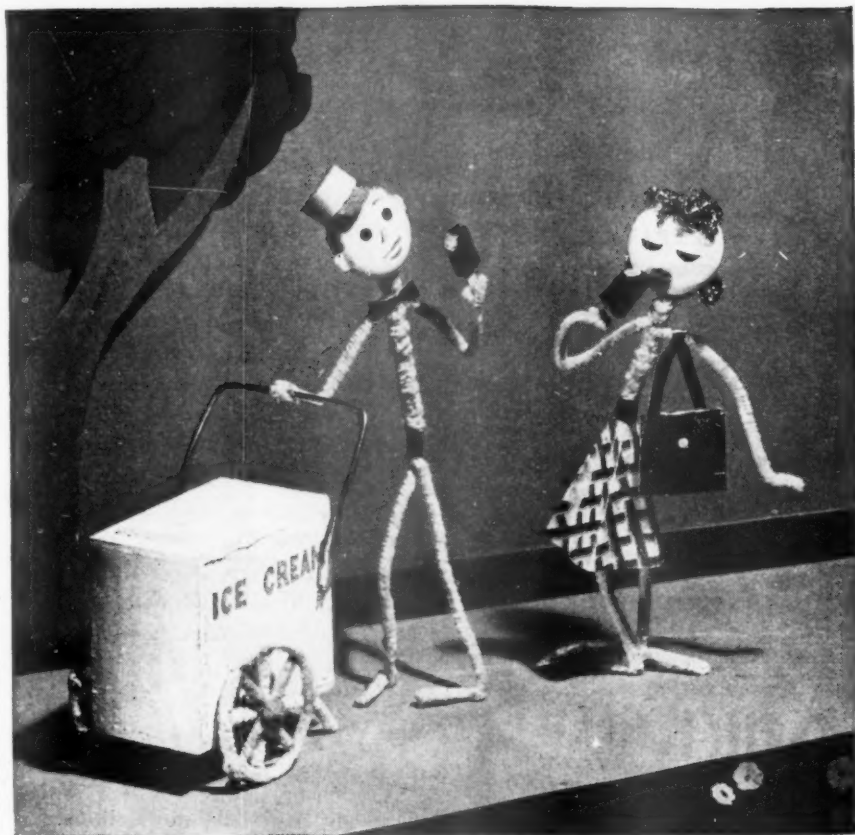
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if they are going to be outcasts when they are cured, we are not following the truths and spirit in which the medical and nursing professions had their origins.

Let us help in every way we can to bring about a nationwide change in public opinion regarding "Leprosy." Let's try to start people calling it "Hansen's disease." As nurses and health educators we can do much for the cause, maybe not in actual care of the patients themselves, but in spreading truth and facts about Hansen's disease, so pitifully unknown at present.

The success of such a campaign would do much to reduce "man's inhumanity to man," and the people of the world afflicted with this disease would no longer have to walk alone.

St. Vincent's

[Continued from page 55]

partment with accommodations for 40 mothers. Primarily a charity hospital, families able to pay more than \$50 for confinement cannot go there, but many large families have had all of their youngsters born in this hospitable institution.

Many of the expectant mothers at St. Vincent's have come to the hospital to have their illegitimate babies. Some, with the help of the social welfare department, will be able to keep their infants with them; others will give them up for adoption knowing that St. Vincent's will watch over their babies in the new homes that have been found for them.

HEARD IN A HOSPITAL CORRIDOR:

*MY POOR HANDS! THEY USED
TO BE WHITE AND SMOOTH
... NOW THEY'RE RED...
AND ROUGH AS CACTUS!*

*SMARTEN UP, HONEY! GET
YOURSELF A JAR OF PACQUINS.
THIS FAMOUS HAND CREAM
WAS FIRST MADE JUST FOR
DOCTORS AND NURSES!*



● Yes, Nurse, you can scrub your hands 30 to 40 times a day...and still have lovely hands. Use snowy Pacquins frequently. Not sticky or greasy. Helps keep your hands looking whiter...feeling softer, smoother. Ask for Pacquins at any drug, department, or ten-cent store.

PACQUINS Hand Cream

ORIGINALLY FORMULATED FOR DOCTORS and NURSES

Doctor Defines Nursing

[Continued from page 47]

further examination is politics and graft . . .

2. **PRACTICAL NURSES.** These are nurses who have received more or less instruction in the art of nursing, though usually little or no formal professional training. If a practical nurse has the recommendation of a reputable physician in the community, she comes as a blessing to any home or individual whose means are limited. Only people of extraordinary wealth can possibly stand the tremendous expense of medical care plus the cost of one or more registered nurses through any prolonged illness these days.

In any case, employment of a

practical nurse should be only on condition that the nurse is approved by the attending physician.

3. **SAIREYGAMPS.** It is long since I read Martin Chuzzlewit and I have forgotten all of the characters in it except Sairey Gamp. Sairey is no figment but a real character—as I know to my sorrow, for I have clashed with her across the patient's bed too many times, and lost too many of these debates.

There are few Dickensonian Sairey Gamps nowadays but plenty of nurses of all categories indulge in saireyamping in the belief that it makes people more willing to pay their wages.

I offer this definition of saireygamp and saireyamping, spelled with small s, like pasteurize and pasteurizing:

A saireygamp is a nurse of any category who does not hesitate to express her own opinion as to the etiology, diagnosis, treatment, prognosis of any ailment that may be brought to her attention, nor to tell at a glance whether an immediate operation is necessary or not.

Every neighborhood has its sairey-gamp, who is likely to be a childless woman who has (a) a clinical thermometer and (b) a fountain syringe and (c) a legend of having once actually nursed in a hospital somewhere. If she also wears a uniform of sorts and is known to have gone far off to the big three-ring "clinic" where all the well-to-do suckers go for an operation, she is all set.

4. **LITTLE TIN DOCTOR.** These are nurses of one category or another

Wonderful for Sick People!

With pure, unflavored Knox Gelatine all kinds of tempting dishes can be made that taste good to sick people. Because Knox recipes are made with real fruits or real vegetables, flavored with their good, natural juices... the patient can enjoy all the fresh flavor and benefit by all the natural vitamins. So much better and better for them than factory-flavored products!

FOR FREE BOOKLET, "Feeding the Patient," write to Knox Gelatine, Johnstown, N. Y., Dept. 450.

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ALL PROTEIN, NO SUGAR

It is not unusual to find
mention of repeated use of...

CORAMINE

CIBA'S WELL RECOGNIZED RESPIRATORY STIMULANT

PHYSIOPATHOLOGY AND SURGICAL TREATMENT OF CONGENITAL CARDIOVASCULAR DEFECTS*

Harvey Lecture, November 15, 1945

ALFRED BLALOCK

Professor of Surgery and Director of the Department of Surgery, The Johns Hopkins University
and Surgeon-in-Chief, The Johns Hopkins Hospital

A child of slightly less than two years of age had an oxygen content of arterial blood of 8.5 volumes per cent, a capacity of 15.0 volumes per cent, an arterial saturation of 20.5 per cent, and a normal red blood cell count and hematocrit reading. The condition was considered critical and operation was advised. After anesthesia was induced by the use of cyclopropane, the arterial blood pressure fell to 60/90 mm. Hg. An incision was made on the right side of the chest and the azygos vein was doubly ligated and divided. At this time the pulsations of the heart were very weak and barely visible. One half cubic centimeter of Coramine was injected into the superior vena cava, and the pulsations of the heart became strong again. The right pulmonary artery was being freed of the constriction when it was noted again that the action of the heart was free of the constriction. Coramine was injected. The pulsations of the heart improved, and it was decided that a second operation was warranted. The child's condition was unchanged after this exploration and a second operation was performed 19 days later. The previous incision was reopened. The innominate artery was shorter than usual, the subclavian artery was larger than usual, and it was decided to use this latter vessel for the anastomosis. When traction was made on the right pulmonary artery, the pulsations of the heart practically ceased. Coramine was injected and the condition improved. In order to avoid unnecessary traction and to reduce the operating time, the end of the artery was ligated and divided and its distal end was anastomosed to the end of the subclavian artery. The action of the heart became strong on two occasions while this was being done, but it responded favorably when Coramine was injected. It is doubtful whether the procedure could have been completed without the use of side anastomosis had been performed. The child showed a dramatic improvement. Twelve days following the second operation the arterial oxygen content was 10.1 volumes per cent, the arterial capacity was 16.3 volumes per cent, and the arterial saturation was 60 per cent, with the preoperative figure of 20 per cent.

During prolonged surgery in poor risk patients it is not unusual for Coramine to be used several times. The number of such reports indicating dramatic life-saving results is very gratifying to the surgeon who has learned to depend on Coramine in such emergencies.

AVAILABLE Ampuls of 1.5 cc.
Ampuls of 5 cc.

For oral administration ... Liquid in 3 ounce bottle
16 ounce bottle
32 ounce bottle



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WHY SUFFER WITH FOOT TROUBLES THAT DRAG YOU DOWN, TIRED, BURNING, TENDER, ITCHING, PERSPIRING FEET OR CORNS AND CALLOUSES GIVE YOU THAT E-X-H-A-U-S-T-E-D LOOK.

QUICK RELIEF!

GET PROMPT RELIEF WITH EFFICIENT, SOOTHING JOHNSON'S FOOT SOAP—THE OLD TIME FAVORITE FORMULA OF BORAX, IODIDE & BRAN. SOFTENS CORNS & CALLOUSES.

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JOHNSON'S FOOT SOAP
BORAX, IODIDE AND BRAN

who get salaried jobs as nurses in industrial plants, schools, health departments, summer camps, large department stores, home offices of corporations and the like, and, in order to satisfy the expectations, implied or expressed, of their employers, double as doctors whenever the employees will stand for it. It is astonishing how much of this phony doctoring employees of such philanthropic corporations stand for.

All the little tin doctor needs is an inexhaustible supply of some "antiseptic" with a color and odor calculated to impress the morons who submit to her ministrations and a keg of aspirin tablets or maybe some trick combination of the sense deadeners on which she gets a little something from the drug manufacturer.



I am sure it is not necessary to tell any one who has ever been very ill or seriously injured and for a while without the care of a nurse and then with the care of a nurse who knows her business, that real nurses are heaven sent.

All the same, I do not advise girls to choose nursing as a career. In the first place, assayed in the ordinary terms, the cost of the education or training required to qualify a girl to practice as a registered nurse is excessive in relation to the financial returns the nurse may reasonably anticipate. If the la-di-da, the politics, and the hospital graft were eradicated—and by hospital graft I hope you know I mean that contemptible trick by which the grafters and petty politicians on the board

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Simple Treatment for Skin Disorders

THE simple Mazon Treatment, employing Mazon Soap and Mazon Ointment, acts swiftly to bring dramatic results alleviating many skin disorders.

greases to retard or nullify the therapeutic action of Mazon Ointment.

1. Cleanse the affected area with Mazon Soap.
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Mazon Ointment itself is absolutely antipruritic, anti-septic and anti-parasitic. It is easy to apply, is non-greasy and non-staining and requires no bandaging.

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Indications include Eczema, Psoriasis, Alopecia, Ringworm, Dandruff, Athlete's Foot and other skin irritations not caused by or associated with systemic or metabolic disease.

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Mazon Soap is 100% pure, contains no free alkali, artificial color, synthetic perfume, excess oils or

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Many clinical studies proving the success of the simple Mazon Treatment are in our files. Its record of success suggests your own trial.

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OINTMENT **SKIN SOAP**
FOR EFFECTIVE DERMAL THERAPY

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of hospitals get a full year of service from trained nurses at a nominal expense—robbing the nurse of at least 5 per cent of her professional life expectation—if these abuses were cleaned out and nurse training restored to an honest educational basis, nursing might be a calling worthy of any girl's choice.

Uniform Uniforms

[Continued from page 45]

cost of their "uniforms" is higher than it would be if designs and materials were standardized. The nurses I have talked with agree that their return on this added cost is negligible. Most nurses are not greatly concerned over the number of pleats in their uniforms, or

the amount of padding in the shoulders. What they want, of course, is a good-looking serviceable model and they try to select one which meets these requirements.

Why could such a model not be adopted and selected for use by nurses all over the nation? Army and Navy nurses have *uniform* uniforms and I think there are few who would criticize their appearance. The same procedure, followed by civilian nurses, would probably enhance, rather than detract from, the attractiveness of their dress.

But lower purchase cost and a trim appearance are not the only benefits which would come from standardization. The nurses would receive better service from their hospital laundries. Under present con-

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WRITE FOR DESCRIPTIVE LITERATURE



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infant cereal
match this one?

CLAPP'S INSTANT CEREAL FOR BABIES

Pre-cooked... ready to serve

Clapp's Instant Cereal is prepared from mixed cereals, fortified with vitamins and minerals, notably vitamin B₁ (thiamine) and Iron, in which the diet of infants and young children may be deficient.

INGREDIENTS

Whole Wheat Meal • Corn Meal
Wheat Germ • Malt • Non-fat Dry Milk
Solids • Calcium Phosphate • Dried
Brewers' Yeast • Salt • Iron Ammonium
Citrate.

TYPICAL ANALYSIS

Carbohydrate 73.1%	Iron (Fe) 30 mg. per 100 gms.
Protein (Nx6.25) 15.0%	Copper (Cu) 2 mg. per 100 gms.
Fat (ether extract) .8%	Thiamine (B ₁) 1.0 mg. per 100 gms.
Ash (total minerals) 3.8%	Riboflavin (B ₂) 0.3 mg. per 100 gms.
Crude Fiber 1.6%	Moisture 5.7%
Calcium (Ca) 800 mg. per 100 gms.	Calories per ounce 102.
Phosphorus (P) 580 mg. per 100 gms.	

NUTRITIONAL VALUES

While the quantity of Clapp's Instant Cereal used may vary considerably for the individual, $\frac{1}{2}$ -oz. and 1-oz. quantities may be considered average daily amounts for the infant and young child respectively. These amounts furnish the following percentages of the minimum daily requirements:

INSTANT CEREAL: For infants, 120% of vitamin B₁; 20% of vitamin B₂. For young children, 60% of vitamin B₁; 113% of Iron; 32% of Calcium; 22% of Phosphorus.

The Council on Foods of the A.M.A. suggests that infant cereals may well be selected upon the basis of furnishing vitamin B₁ and Iron. Clapp's Cereals are an excellent source of these two food elements and thus are preferred for inclusion in infants' diets.

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BABY CEREALS

PRODUCTS OF AMERICAN HOME FOODS, INC.



CLAPP'S BABY FOOD DIVISION,
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Please send me a supply of professional
samples of Clapp's Instant Cereal and
Clapp's Instant Oatmeal.

Name _____
Address _____
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ditions, both quality of washing and quality of pressing, suffer. The amount of blue necessary to give good results on one type of uniform is not always correct for others in the same lot, due to differences of materials. If all uniforms were the same, this situation would no longer exist. As for pressing, laundry employees would become highly skilled in handling uniforms of exactly the same type day after day. The net result, again, would be an improvement in our nurses' neat appearance.

Strangely enough, student nurses have a uniform, though graduates do not. Granted, the student uniform, with its bib and apron, is far from a model of simplicity, it nonetheless is standard and therefore a start in the right direction . . .

Our first responsibility is the well-being of the patients our hospitals serve. Anything that prevents us from giving patients fast, thorough laundry service detracts from the efficiency of the institution.

[R.N. will pay \$5 for the letter containing the most practical reply to Mr. Emery's comments.—THE EDITORS.]

'Sas Efchareesto'

[Continued from page 52]

U.N.R.R.A. has assigned a hospital consultant to the Phthiotis area; working under considerable difficulties she has done much to improve the institution, even to the point of recruiting five girls to undertake practical nurse instruction in the Lamia hospital. This may seem unimportant until you consider that in the entire region there are only two Greek graduate nurses.

Our long-term mission, of course, is to aid the Greek people to set up their own health facilities, meanwhile trying to establish vitally needed training programs. Eventually we hope to have a Greek nurse as "opposite number" to each U.N.R.R.A. nurse. Until then, we must do a great deal of the actual work ourselves. And work it is. How easy to report that "a clinic was held" in Karpenissi—after you've courted a nervous breakdown in conducting it. Karpenissi is three and a half hours away from Lamia by jeep. But since you don't have a jeep you do the best you can, which means you travel by



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New booklet "*Making the World Safe for Baby*" by Beulah France, R.N., gives much helpful information. Write: Trimble, 60 Wren St., Rochester 13, N. Y.



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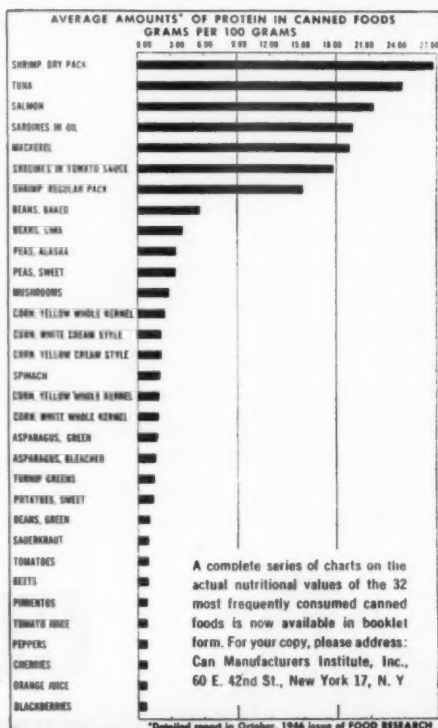
Food Values YOU CAN COUNT ON!

In an extensive university research project, jointly sponsored by the National Canners Association and the Can Manufacturers Institute, Inc., assays were made of 823 samples of 32 commercially canned foods. The chart on the right gives the average amounts of protein in the 32 above-mentioned foods.

As you know, the figures usually quoted for nutrients in raw, uncooked foods are *gross* figures, subject to widely varying deductions for losses occurring in transit from field to market, to kitchen, and in home preparation. It is of special significance that the figures resulting from these university studies of foods packed in cans are *net* values, the actual, on-the-table values in cooked, ready-to-eat canned foods.

Our story, we know, is not new to you. But frankly, we realize that in order for canned foods to receive the public acceptance they merit, they must receive widespread recommendation from leaders in the professional field. We sincerely request your support.

**GOOD, NUTRITIOUS FOODS . . .
and they all come to you in cans**



No Other Container Protects Like the Can

truck for an hour to the "end of the road," and then take to muleback for the rest of the journey.

Picture a nurse, followed by her interpreter, jogging for hours along a narrow trail, holding an umbrella aloft as protection against a searing summer sun, and ready to leap out of her wooden sidesaddle should the mule slip, which they do often enough. I have often wondered at the hidden reserve of strength a girl must have to be able to conduct a clinic after such a journey.

The interpreter is a necessity for all but a few of us; most have achieved only a brief "working vocabulary" of Greek. The latter is useful, though, for in spite of bad grammar and worse pronunciation, we manage to make ourselves clear

in giving simple instructions. It sounds like a new twist on an old joke, but the fact remains that practically all of us have had the experience of struggling through a conversation in Greek and then being asked, "Do you speak English?"

More and more Greeks are learning to speak English, since it has replaced French in the schools. It may be that we'll all be on speaking terms before U.N.R.R.A. nurses pack their things for the long journey home.

GRADUATES OF AUBURN CITY HOSPITAL TRAINING SCHOOL, Auburn, N.Y.: If you have lost contact with your Alumnae Association, please communicate with Jean Mapes, Secretary, A.C.H., Auburn, N.Y.



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- 2 The entire treatment may be completed within 15 minutes**
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- 4 Cuprex saves the patient time and embarrassment**

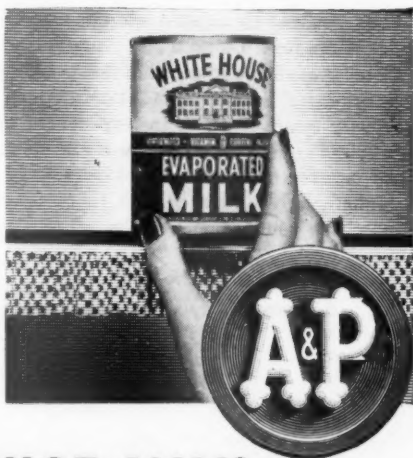


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STYLE 1156
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Positions Available

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***ANESTHETIST:** Pennsylvania. General hospital; all-graduate staff; salary open. (Placement bureau charges \$2 registration fee.) Box SM10-1.

***ASSISTANT ADMINISTRATOR:** East. Duties consist of assisting administrator and also director of nurses; small hospital in residential town near Boston; \$2,800. (Placement bureau charges \$2 registration fee.) Box RN10-3.

ASSISTANT DIRECTOR OF NURSES: West. Exclusive 100-bed sanitarium near Los Angeles; neuro-psychiatric and general; efficient supervision of floor nursing and executive ability required; single; \$225, board and living quarters. Apply: Director of Nurses, Garden Grove Sanitarium, Garden Grove, Calif.

***CLINIC NURSE:** California. Active clinic vicinity Monterey. Hours 9-5 alternate week-ends off; \$230. (Placement bureau charges \$2 registration fee.) Box C-259.

GENERAL DUTY NURSES: East. 50-bed general hospital located in thriving village in Catskill Mts.; \$125, full maintenance; 8-hour day; 6-day week; vacation. Apply: Supt., Margaretville Hospital, Margaretville, N. Y.

GENERAL DUTY NURSES: Florida. 8-hour day; 6-day week; \$125, maintenance; one month rotating night duty. Apply: Supt., Tampa Municipal Hospital, Tampa 6, Fla.

GENERAL DUTY NURSES: Nebraska. 6-day week; \$175, full maintenance. Apply: Imperial Community Hospital, Imperial, Nebraska.

GENERAL DUTY NURSES: Ohio. 135-bed approved general hospital; medical, surgical, obstetrical depts.; \$6.60 days; \$6.80 nights; increase after 3 months if permanent; rooms

available in vicinity. Apply: Director of Nursing Service, Glenville Hospital, Cleveland 8, Ohio.

GENERAL DUTY NURSES: Maryland. \$150, full maintenance; 2-week vacation; sick leave; 40-bed general hospital in rural community 12 miles from Washington, D.C.; bus service; 46-hour week; new nurses' home; individual rooms. Apply: Supt., Montgomery County General Hospital, Inc., Olney, Maryland.

GENERAL DUTY NURSES: Texas. Also several supervisory positions; progressive, teaching hospital; located in wealthy city; exceptional salaries. Apply: Supt. of Nurses, Wichita General Hospital, Wichita Falls, Texas.

GENERAL DUTY NURSES: East. \$150, full maintenance; vacation; sick leave; pension; annual increase \$100. Apply: Suffolk Sanatorium, Holtsville, Long Island, N. Y.

GENERAL DUTY NURSES: 140-bed general hospital; day duty \$180; evening and night duty \$190; laundry; maintenance at cost; vacation; sick leave; unused portion paid at end of year. Apply: Memorial Hospital of Natrona County, Casper, Wyoming.

GENERAL DUTY NURSES: Texas. 120-bed hospital; 8-hour duty; 6-day week; \$145; meals, laundry; \$5 monthly bonus for evening and night duty. Apply: Southwestern General Hospital, El Paso, Texas.

GENERAL DUTY NURSES: Michigan. Medical-dental hospital group; minimum salary and maintenance equals \$240; bonus and vacation. Apply: Keyes Dearborn Clinic & Diagnostic Hospital, Dearborn, Mich.

GENERAL DUTY NURSES: Tennessee. 120-bed hospital; straight 8-hour duty, 5-day week; basic salary with full maintenance: \$135 in single room, \$144.50 in double room; \$10 and \$20 additional for night and evening

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duty; if "live out" additional \$40, plus meals on duty and laundry; \$5 increase each 6 months for 2 years. Apply: Supt., Holston Valley Community Hospital, Kingsport, Tenn.

GENERAL DUTY NURSES: Michigan. Full time or part time combined with university study; 8-hour day, 6-day week; holidays, sick leave, vacation; full cash basis; \$195-\$205; additional \$10 for evening and night duty. Apply: Director of Nursing, University Hospital, Ann Arbor, Mich.

GENERAL DUTY NURSES: West. 150-bed hospital; \$200 for surgical and medical with \$2.50 raise each 6 months; \$10 more for evening and night shifts, also for operating and delivery rooms. Apply: Riverside Community Hospital, Riverside, Calif.

GENERAL DUTY NURSES: Idaho. Surgical and obstetrical; \$160, full maintenance; additional \$5 for afternoon and evening service; 8-hour duty, 6-day week. Also OR nurses and night supervisor 11-7 shift; \$200, full maintenance. Apply: Twin Falls County General Hospital, Twin Falls, Idaho.

GENERAL DUTY NURSES: South. 100-bed general hospital; no school; organized medical staff; comfortable living conditions in nurses' home; good salary. Apply: Miss Lillian Presnell, R.N., Supt., John D. Archbold Memorial Hosp., Thomasville, Ga.

***INDUSTRIAL NURSE:** Chicago. Fairly large plant; \$50. (Placement bureau charges \$2 registration fee.) Box RN10-5.

***INDUSTRIAL NURSE:** Illinois. Opening in medical dept. of large, modern plant in Chicago; \$2,600. (Placement bureau charges \$2 registration fee.) Box C-260.

***INSTRUCTOR, SCIENCE:** East. One of leading hospitals in Philadelphia area; \$250, maintenance. (Placement bureau charges \$2 registration fee.) Box RN10-7.

***INSTRUCTOR, SCIENCE:** Hawaii. Duties consist of formal classroom teaching, relieving in nursing school office; general hospital; \$240; transportation provided. (Placement bureau charges \$2 registration fee.) Box RN10-8.

***MEDICAL SECRETARY:** Chicago. To assist doctor with unusual and interesting research program in local college; 5-day week; maximum \$2,400. (Placement bureau charges \$2 registration fee.) Box C-261.

***NURSE-SECRETARY:** Middlewest. For director of military academy situated on beautiful lake not far from Chicago; liberal salary; room, board, laundry. (Placement bureau charges \$2 registration fee.) Box C-262.

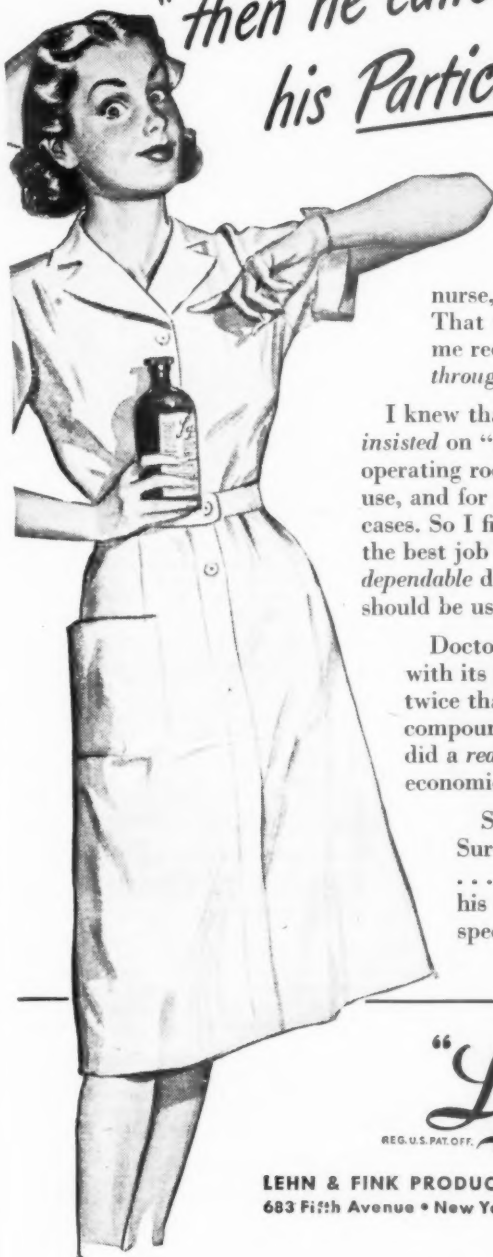
***OFFICE NURSE:** Middlewest. 8-hour duty; for woman doctor; salary open. (Placement bureau charges \$2 registration fee.) Box SM10-2.

***PHYSICAL THERAPIST:** Missouri. Registered; medical-surgical clinic; salary open. (Placement bureau charges \$2 registration fee.) Box SM10-3.

PSYCHIATRIC NURSES: Illinois. Also general duty nurses; for State hospital assignments; good salaries; opportunity for advancement; excellent retirement and insur-

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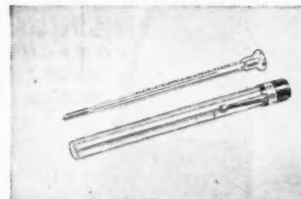
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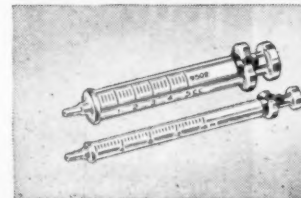


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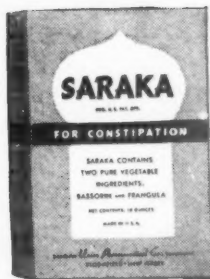
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